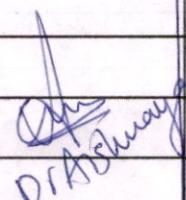
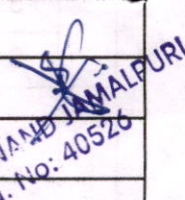


PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
21/5/26 10 AM	Seen by Dr. Vijayanand	Plan
		1) cont low flow. 2) cont full OG feeds 3) KMC
		NNS cont OMS
		4) stat oral furosemide 2mg/kg
	 Dr. Ashwini	 Dr. VIJAYANAND JAMALPURI Reg. No: 40526
21/5/26 12:30 PM	Afternoon rounds	Noted by Sri Lakshmi 21/5/26
	- on low flow - 0.2 l/hr	Plan:
	SpO ₂ - 96%, PR - 158/min RR - 30/min	<input checked="" type="checkbox"/> continue low flow <input checked="" type="checkbox"/> TV - 17 ml/kg/day ↓ 29 ml and help full OG feeds <input checked="" type="checkbox"/> continue KMC + 3% meal OMS, NNS.
	- furosemide - stat given. - Pop - Zone 3, no stack, no plus, R/A 1 meta.	<input checked="" type="checkbox"/> R/S OD. <input checked="" type="checkbox"/> w/f vitals <input checked="" type="checkbox"/> prone nursing,

DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (NON-VENTILATED)

Day in NICU: Day of Life: PMA:

Term Preterm Gestation: Corrected Gestational Age: Today's Weight:

	Problems		
	S.No.	Current	Past Problems
Overview	1.		
	2.		
	3.		
	4.		
	5.		
	6.		
Clinical Assessment			
Medications Used			
Plan of Care:			

Doctor's Name (Hand over given):

Doctor's Name (Hand over taken):

Signature:

Signature:

Date & Time:

Date & Time:



②

RBS CHART

Date	Time	RBS (mg/dl)	IVF %	Signature
2/4/26	6Am	124 mg/dl	Full feed	[Signature]
3/4/26	6am	131 mg/dl	full feed	[Signature]
4/4/26	6am	130 mg/dl	full feed	[Signature]
5/4/26	6Am	110 mg/dl	full feed	[Signature]
5/4/26	6Am	121 mg/dl	Full feeds	[Signature]
7/4/26	6 pm	122 mg/dl	full feeds	[Signature]
8/4/26	6 Am	142 mg/dl	full feed	[Signature]
9/4/26	6 Am	107 mg/dl	full feed	[Signature]
10/4/26	6A	100 mg/dl	" "	[Signature]
11/4/26	6 am	98 mg/dl	" "	[Signature]
12/4/26	6am	71 mg/dl	full feeds	[Signature]
13/4/26	6 am	86 mg/dl	Full feed	[Signature]
13/4/26	7 pm	85 mg/dl	full feed	[Signature]
14/4/26	8 pm			
14/4/26	6 AM	99 mg/dl	full feeds	[Signature]
15/4/26	6am	84 mg/dl	full feed	[Signature]
16/4/26	6Am	138 mg/dl	Full feed	[Signature]
17/4/26	6AM	107 mg/dl	Full feed	[Signature]
18/4/26	6AM	79 mg/dl	Full Feed	[Signature]
19/4/26	6Am	80 mg/dl	full feed	[Signature]
20/4/26	6 A~	120 mg/dl	full feed	[Signature]
22/4/26	6 A~	100 mg/dl	full feed	[Signature]
24/4/26	6am	100 mg/dl	full feed	[Signature]
26/4/26	6am	99 mg/dl	full feed	[Signature]
27/4/26	6 am	102 mg/dl	full feed	[Signature]
28/4/26	6am	84 mg/dl	full feed	[Signature]
28/4/26	11 Am	88 mg/dl	NPO	[Signature]
28/4/26	8 Pm	276 mg/dl	NPO	[Signature]



RBS CHART

Date	Time	RBS (mg/dl)	IVF %	Signature
28/4	10pm	296 mg/dl	10% ISOP	[Signature]
29/4	12pm	150 mg/dl	7.5% ISOP	[Signature]
29/04	2pm	180 mg/dl	7.5% ISOP	[Signature]
29/04	8am	176 mg/dl	7.5% ISOP	[Signature]
	9pm	160 mg/dl	7.5% ISOP	[Signature]
30/4	6pm	105 mg/dl	7.5% ISOP	[Signature]
30/4	6AM	109 mg/dl	full feed	[Signature]
01/05	6pm	106 mg/dl	full feed	[Signature]
02/05/26	8pm	109 mg/dl	full feed	[Signature]
3/5	8pm	98 mg/dl	full feed	[Signature]
4/5/26	1am	88 mg/dl	full feed	[Signature]
5/5/26	12pm	110 mg/dl	full feed	[Signature]
5/5	7pm	96 mg/dl	full feed	[Signature]
6/5	7AM	100 mg/dl	full feed	[Signature]
8/5	6PM	110 mg/dl	full feed	[Signature]
7/5	6AM	103 mg/dl	full feed	[Signature]
7/5	7pm	180 mg/dl	full feed	[Signature]
8/5	6AM	98 mg/dl	full feed	[Signature]
10/5	6AM	96 mg/dl	full feed	[Signature]
12/5	6am	101 mg/dl	full feed	[Signature]
13/5	6AM	97 mg/dl	full feed	[Signature]
15/5	6AM	98 mg/dl	full feed	[Signature]
16/5	6AM	138 mg/dl	full feed	[Signature]
17/5	6AM	91 mg/dl	full feed	[Signature]
18/5	6AM	106 mg/dl	full feed	[Signature]
19/5	6AM	98 mg/dl	n	[Signature]
21/5	6AM	120 mg/dl	n	[Signature]
22/5	6A-	100 mg/dl	n	[Signature]

00650784 I/S-00171911
 OF P SANDHYA RANI
 -2028 0 Y 2 M 10 D (M)
 JAYANAND JAM/LP/JRI



rub

FLUID CHART

Sheet No. :

- All measurements in ml.
- Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.

Date	Time	Intake			Output					IV Site Thrombo-phlebitis Score	Sign. Nurse	
		Nature of Fluid	Route		NG	Diarrhoea	Vomit	Drainage	Urine			
			Mouth	I.V	NG							
	08:00 am											
	09:00 am	EBM	29 ml			Not passed			6 ml			
	10:00 am	(45 mins)										
	11:00 am								10 ml			
	12:00 pm	EBM	29 ml									
	01:00 pm	(30 mins)				Not passed			8 ml			
Total Intake :					Total Output :							
	02:00 pm	EBM	29 ml									
	03:00 pm	(30 mins)							10 ml			
	04:00 pm	EBM	29 ml			Not passed						
	05:00 pm	(40 mins)							8 ml			
	06:00 pm											
	07:00 pm	EBM		29 ml					6 ml			
Total Intake :					Total Output :							
	08:00 pm											
	09:00 pm	EBM		29 ml								
	10:00 pm								10 ml			
	11:00 pm	EBM		29 ml		Passed						
	12:00 am								15 ml			
	01:00 am	EBM		29 ml								
Total Intake :					Total Output :							
	02:00 am											
	03:00 am	EBM		29 ml		Not passed			6 ml			
	04:00 am					passed						
	05:00 am	EBM		29 ml					8 ml			
	06:00 am											
	07:00 am	EBM	29 ml	35 ml					13 ml			
Total Intake : 348					Total Output : 100 ml							

Total 24 hrs. Intake : 165 ccl/kg/day

Total 24 hrs. Output : 1.9 ccl/kg/day

25/5/22

FLUID CHART

Sheet No. :

1. All measurements in ml.
2. Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.
3. 24 hrs. total to be entered in the kardex in RED.

Date	Time	Nature of Fluid	Intake			Output					IV Site Thrombophlebitis Score	Sign. Nurse	
			Mouth	I.V	N.G	NG	Diarrhoea	Vomit	Drainage	Urine			
	08:00 am												
	09:00 am	EBM 50ml	29ml							10ml			
	10:00 am												
	11:00 am	EBM 45ml	29ml							9ml			
	12:00 pm												
	01:00 pm	EBM 35ml	29ml							10ml			
Total Intake :						Total Output :							
	02:00 pm												
	03:00 pm	EBM 40ml	29ml							10ml			
	04:00 pm												
	05:00 pm	EBM 20ml	29ml							9ml			
	06:00 pm												
	07:00 pm	EBM 25ml	29ml							10ml			
Total Intake :						Total Output :							
	08:00 pm												
	09:00 pm	EBM 30ml	30ml							11ml			
	10:00 pm												
	11:00 pm	EBM 30ml	30ml							10ml			
	12:00 am												
	01:00 am	EBM 30ml	30ml							7ml			
Total Intake :						Total Output :							
	02:00 am												
	03:00 am	EBM 30ml	30ml							8ml			
	04:00 am												
	05:00 am	EBM 30ml	30ml							7ml			
	06:00 am												
	07:00 am	EBM 30ml	30ml							10ml			
Total Intake :						Total Output :							

Total 24 hrs. Intake : 1530cc/day

Total 24 hrs. Output : 2.1cc/day



FLUID CHART

Sheet No. :

- All measurements in ml.
- Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.

Date	Time	Nature of Fluid	Intake			Output					IV Site Thrombo-phlebitis Score	Sign. Nurse	
			Mouth	I.V	N.G	NG	Diarrhoea	Vomit	Drainage	Urine			
	08:00 am												
	09:00 am	EBM MMP			28ml		passed			11ml	1		
	10:00 am												
	11:00 am	EBM MMP 1/2			28ml								
	12:00 pm									15ml	1		
	01:00 pm	EBM MMP 3/4			28ml								
Total Intake :						Total Output :							
	02:00 pm												
	03:00 pm	EBM MMP			28ml		passed			1ml			
	04:00 pm												
	05:00 pm	EBM MMP			28ml								
	06:00 pm						passed			10ml	1		
	07:00 pm	EBM MMP			28ml								
Total Intake :						Total Output :							
	08:00 pm												
	09:00 pm	EBM MMP 3/4			28ml		—			10ml	1		
	10:00 pm												
	11:00 pm	EBM MMP 3/4			28ml		—			11ml	0		
	12:00 am												
	01:00 am	EBM MMP 3/4			28ml		—			7ml	1		
Total Intake :						Total Output :							
	02:00 am												
	03:00 am	EBM MMP 3/4			28ml		Passed			10ml			
	04:00 am												
	05:00 am	EBM MMP 3/4			28ml		—			7ml			
	06:00 am												
	07:00 am	EBM MMP 3/4			28ml		—			8ml			
Total Intake : 336 cc/kg/day						Total Output : 108 cc/kg/day							
Total 24 hrs. Intake			168 cc/kg/day			Total 24 hrs. Output			2.0 cc/kg/day				



21/5/26

FLUID CHART



Sheet No. :

1. All measurements in ml.
2. Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.
3. 24 hrs. total to be entered in the kardex in RED.

Date	Time	Nature of Fluid	Intake			Output					IV Site Thrombophlebitis Score	Sign. Nurse	
			Mouth	I.V	NG	NG	Diarrhoea	Vomit	Drainage	Urine			
	08:00 am				NG								
	09:00 am	EBMT MMF		28ml		-				10ml	1		
	10:00 am										0		
	11:00 am	EBMT MMF		28ml		-				9ml	1		
	12:00 pm												
	01:00 pm	EBMT MMF		29ml		-				9ml			
Total Intake :						Total Output :							
	02:00 pm												
	03:00 pm	EBMT MMF		29ml		Small passed				10ml	1		
	04:00 pm										0		
	05:00 pm	EBMT MMF		29ml		-				10ml	1		
	06:00 pm												
	07:00 pm	EBMT MMF		29ml		-				9ml			
Total Intake :						Total Output :							
	08:00 pm												
	09:00 pm	EBMT MMF		29ml		-				10ml	1		
	10:00 pm												
	11:00 pm	EBMT MMF		29ml		-				10ml	1		
	12:00 am												
	01:00 am	EBMT MMF		29ml		Passes				7ml	1		
Total Intake :						Total Output :							
	02:00 am												
	03:00 am	EBMT		29ml		-				8ml	1		
	04:00 am												
	05:00 am	EBMT		29ml		-				10ml	1		
	06:00 am												
	07:00 am	EBMT		29ml		-				5ml	1		
Total Intake : 346						Total Output : 107 ml							

Total 24 hrs. Intake 164 cc/Kg/day

Total 24 hrs. Output 2.1 cc/Kg/day



15

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
15/5/26 10:30AM	seen by Dr. Vijayanand	Plan
		① cont HFNC 4l/min ② HF₂ on Monday ③ cont KMC, NNS. ④ ROP - 21/5/26 ⑤ aus weekly once
15/5/26 11:50pm	Afternoon Round -	Plan
	on HFNC - 4lt No heady/decat Ongoing KMC. <u>Vitals</u> HR - 164/min RR - 42/min. SpO ₂ - 98%. BP - 71/38 (51)	→ Continue HFNC - 4lt Target SpO ₂ 90-95%.
	P/A - Soft	→ TV - 160cc/day. 25ml/2 adheby + fortification + 3.i. Nall.
		→ Gas - once weekly. CRBS - OD
		→ ROP on 21/5/26
		→ Monitor vitals <u>Poplite</u>

~~Dr. VIJAYANAND JAMALPURI
 Reg. nu. 2026~~

NO

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
15/3/26	<p>seen by Dr. vijayanand stable on 4L HFNC tolerating tube</p>	<p><i>[Signature]</i> Dr. [Name]</p>
15/3/26	<p><u>Night rounds</u></p> <p>9:45 PM</p> <p>- on HFNC 4 liters</p> <p>- no bradycardia</p> <p>- no desaturation</p> <p>SpO₂ - 96%</p> <p>PR - 156/min</p> <p>RR - 60/min</p>	<p>seen by Dr. Salet</p> <p>place</p> <p>continue HFNC</p> <p>continue</p> <p>2nd and 3rd feeds</p> <p>OG feeds</p> <p>w/ apnoea</p> <p>bradycardia, desaturation</p> <p><i>[Signature]</i></p>
		<p>Noted by Srilatha 15/3/26</p>



18

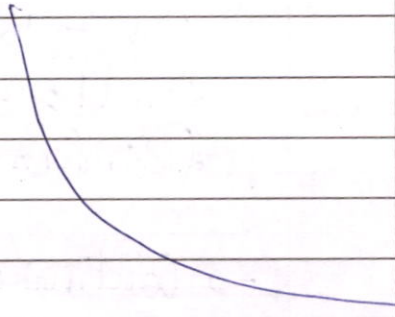
PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
16/5/26 10:11am		Seen by Dr. Vijayanand → HFNC - 3lit
	T.wt - 1892g (↑10g)	→ Continue kmc, nncs oms
	↓ Poopitis	
15/5/26 1:30pm	Afternoon Round	
	on HFNC - 3lit No brady/ desat	Plan → Continue HFNC - 3lit Target spo ₂ 90-95%
	Vitals HR - 152/min RR - 58/min SpO ₂ - 97% BP - 85/55 (61)	→ TV - 16cc/kg/day 25ml 2nd hely + fortification + 3% Nacl
	P/A - soft	→ Continue kmc, oms nncs → Monitor vitals
		Poopitis

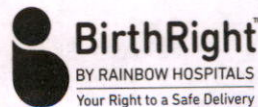
Dr. VIJAYANAND JAMALPURI
 REG. NO. 40526

18

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
16/5/26 8:40pm	Night Round	
	on HFNC - 3lt No heady/desat	<u>Plan</u>
	<u>Vitals</u> HR - 180/min RR - 42/min SpO2 - 96% BP - 63/33 (43)	→ Continue HFNC - 3lt → TV - 160cc/kg/day 25ml/h hourly + fortification + 3% dext.
	P/A - soft	→ Continue kmc, OMS MMS
		→ 2to charting 6 hourly → Monitor vitals
		<u>Signature</u>
		Noted by Srs. Navaretha 16/5/26 @ 8:40pm

BAH-00650784 IP5-00171911
Baby D P SANDHYA RANI
11-03-2026 0 Y 1 M 28 D (M)
Dr. VIJAYANAND JAMALPURI



Masandhyasani

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
5/5/26	<p>CPAP weaning trial on ventilator - actively employing on weaning of settings. Cate @ 20. Olanzapine 5mg po. Antibiotics per of total 10 days. Edema present. lung base not today CXR - 16 better per plung of antibiotics tomorrow full feeds -</p>	<p><i>Bhanu</i></p>

Patient Sticker

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

Patient Sticker

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
<u>6/5/26-</u>	b/o <u>Sandhya Rane</u>	
	→ Plan to extubate today.	
	→ Weaning to NIV, further weaning if stable today	
	→ On IV antibiotics.	
	→ Chest x Ray improved today.	
	→	

Patient Sticker



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

PROGRESS NOTES AND DOCTOR'S ORDER

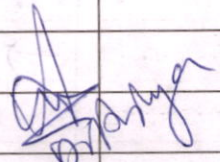
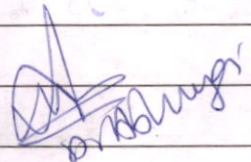
Date & Time	Progress Notes	Doctor's Order
7/26	B/o <u>Landhya Rani</u>	
	→ Baby has been weaned to CPAP	
	→ To evaluate for infection markers	
	and allow -	
	→ Discussed about genital edema.	
	→ Need further improvement in	
	lung function to wean off CPAP.	

Patient Sticker

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	<i>Faint handwritten notes</i>	
	<i>Faint handwritten notes</i>	
	<i>Faint handwritten notes</i>	
	<i>Faint handwritten notes</i>	
	<i>Faint handwritten notes</i>	
	<i>Faint handwritten notes</i>	
	<i>Faint handwritten notes</i>	
	<i>Faint handwritten notes</i>	
	<i>Faint handwritten notes</i>	

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
22/5/26 2:30 PM	Seen by Dr	Vijayanand Plan
		① cont low flow ② cont full feeds
		
22/5/26 3 AM	Morning note VPT/EBW encephalopathy CD grade II. Hypospadias. 2.1kg (↑50g) on low flow 0.1l/min intermittent tachypnea HR-137/min SpO ₂ -100% RR-49/min	VAP- klebsiella Hypocalcemic tetany Hypophosphatemia Plan
	tolerating on well PA - soft	① low flow as tolerated ② TV = 170ml/kg/day 29ml q2H full OR feeds ± 3.7 NaCl ± 0.5gm fortifications
	on caffeine vit D ₃ and/or XT Fortification ± 3.7 NaCl - Ossopan D	③ (RW) palademy ④ prone nursing KMC, NNS, OMS ⑤ (RW) NP ₂ .
		

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 2 M 10 D (M)
 Dr. VIJAYANAND JAMALPURI



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
22/5/26 @ 10:30am		Seen by <u>Dr. Vijayanand</u>
		→ wear low flow as tolerated
		→ Try 1 paladay feed under supervision + rest Oq feed
		→ Continue kmc, NNS ONS
		→ NP ₂ today tomorrow
22/5/26	Afternoon rounds	<div style="text-align: right;"> Not signed by 22/5/26 Dr. Vijayanand 25 </div>
1:00PM		plans
	- on low flow ↓ Room air,	- wear off low flow
	- NO brady - NO desaturation	+ to keep low flow soe - Target SpO ₂ - 90 to 100%



asei

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	<p>— ongoing kmc;</p>	<p>✓ continue kmc MMS, OMS</p>
	<p>SPO₂ - 94% RR - 165/min PR - 50/min.</p>	<p>✓ TV - 170 ml/kg/day ↓ 29 ml 2nd baby feed of feeds + 5% Nacl + 0.5 g MMF</p>
		<p>✓ R/v 1 g MMF</p>
		<p>✓ NP₂ Tomorrow</p>
		<p>Sub</p>
<p>22/5 2:30 PM</p>		<p>seen by Dr. Sub Vijaayendra S 22/5/26</p>
		<p>→ sent OG feeds</p>
		<p>↓ in manual</p>

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
22/5/26 9 PM		seen by <u>Dr. Wheeler</u>
	Dehydration @ while crying No Beady / No Apnea	- low flow Sol. Nasals as planned.
	Intermittent Tachypnea @	- continue on feeds.
	Vitals: SpO ₂ - 98% HR - 145/min RR - 64/min BP - 67/31 (93)	KMC ONS / Continue (Dr. Vijayanand)
23/5/26 10:05am		Seen by <u>A. Vijayanand</u>
	→	Low flow Sol
	→	Continue KMC, ONS
	→	Trace NP2.
	→	Try 2-3 paladay feeds

Respirator



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (NON-VENTILATED)

Day in NICU: Day of Life: 73 PMA: 39+2

Term Preterm Gestation: 28+6 Corrected Gestational Age: Today's Weight:

		Problems	
		S.No.	Past Problems
Overview		1.	VPT / ELBW
		2.	CLD grade II
		3.	Hypospadias
		4.	
		5.	
		6.	
Clinical Assessment	on low flow vitals - stable		
Medications Used	Caffeine vit D3 clofe XT Folterbication 3% NaCl Asopam-D		
Plan of Care: continue low flow TV - 170 cc/kg/day ⇒ 29 ml/24 hrs @ 9g Monitor vitals			

Doctor's Name (Hand over given): Pranitha

Signature: [Signature]

Date & Time: 23/5/26

Doctor's Name (Hand over taken):

Signature:

Date & Time:

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
23/5/26	Afternoon Round	
	on RA.	
	Intermittent desat.	
	with Self pick up.	
	1 episode of bradypnea.	
	improved on stimulation.	
	accepted 1 nipple feed.	Plan
	<u>vitals</u>	
	HR - 170/min.	→ low flow s/s
	RR - 49/min.	or if increased
	SpO2 - 95%.	episodes of bradypnea.
	BP - 65/35 (45)	
	PIA - soft.	→ TV - 130cc/kg/day
	tolerating feed	29ml/2nd hly.
		full OG feed 2-3
		paladay.
		→ discuss NP2
		report.
		→ After 3 paladay
		or nipple feeds
		go back to OG
		feeds
		→ w/f apnea, brady

3AH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 2 M 12 D (M)
 Dr. VIJAYANAND JAMALPURI



Rainbow
 Children's
 Hospital
 It takes a lot to treat the little.

BirthRight™
 BY RAINBOW HOSPITALS
 Your Right to a Safe Delivery

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
23/3/26 3:15 PM		<u>seen by Dr. vijayanand</u>
		<u>plans</u> - Add oscopan-D 2ml 4th hourly. [6 times in a day] <u>Asb</u>
24/3/26 8:40 AM		<u>Seen by Dr. vijayanand</u>
		<u>plans</u> - Try 4 paladai feeds today. - continue lmc <u>oms,</u>
Hb- 8.6g		Noted by Dr. Baxy 24/3/26 @ 8:50 am Dr. Anand Dr. VIJAYANAND JAMALPURI MRB.No: 40526

BAH-00650784 IP5-00171911
Baby Of P SANDHYA RANI
11-03-2026 0 Y 2 M 13 D (M)
Dr. VIJAYANAND JAMALPURI



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
<u>11/5/26</u>	b/o <u>Sandhya Rani</u>	
	→ On HFNC - 4lit → Explained about hypospadias need for surgical correction later in life.	
<u>15/5/26</u>	B/o <u>Sandhya Rani</u>	
	- weight gain present - continuing HFNC.	
		Sub

Patient Sticker

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
16/5/26	B/o. <u>Sandhya Rami</u>	
	→ Stable on HFNC.	
	→ Weaning plan explained.	
	→	

Patient Sticker



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

Patient Sticker

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
<u>2/15/26</u>	B/O = Sandhya rani	
	- issue of intermittent tachypnea - to give one dose of furosemide	
		Aub

Patient Sticker



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	<i>[Faint handwritten notes]</i>	<i>[Faint handwritten notes]</i>

3AH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 2 M 12 D (M)
 Dr. VIJAYANAND JAMALPURI



24/5/26



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (NON-VENTILATED)

Day in NICU: Day of Life: 74 PMA: 39+3

Term Preterm Gestation: 28+6 Corrected Gestational Age: Today's Weight: 2.143 (418gm)

S.No.	Problems	
	Current	Past Problems
1.	VPT/ELBW	VAP - Klebsiella
2.	CID grade II	Hypocalcaemia
3.	Hypospadias	
4.		
5.		
6.		

Clinical Assessment
 On RA
 No desat / brady.
 Accepted 3 paladay feeds
 Vitals - stable
 ↑ Syp. Oxycodone-D

Medications Used
 Caffeine 3%. NaCl.
 vit D3
 oxycodone D
 oxycodone XT
 Fortification

Plan of Care:
 - Continue low flow SO2
 - TV - 170cc/kg/day → 30ml/2nd haly
 Try 4 paladay feed, Rest OG
 - Continue kmc, OMS, NNS

Doctor's Name (Hand over given): Arub Doctor's Name (Hand over taken): Preethi
 Signature: Arub Signature: Preethi
 Date & Time: 24/5/26 Date & Time: 24/5/26



RESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
24/3/26	Night Round	
	on RA	
	Tolerated 2 nd nipple feeds well. ≈ 30 mins No desat	Plan + Continue @ 4 feed overnight
	Vitals - stable	Restart nipple feed at 7am.
		d.
25/3/26 9:00am	Seen by Dr. Vijayanand	Seen + Plan
		→ Day paladay feeding
		→ w/f distress, tachypnea
		→ Weekly review
	Respiratory	→ Rewrite OxyxTK Caffeine order



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	Morning note	2/25/26
25/5/26 9 AM	28 + 6 → 39 + 4 / POL 75	
	NPT, EBW	
	C/D grade II	
	Hypospadias	
	on RA, no distress	
	Taken ^{bottle} orally ~ 30 min	
	yday	
	Autml	
	Buttermilk	
	HR - 170/min	Plan
	RR - 39/min	① cont on RA
	SpO ₂ - 98%	② TV = 170ml / yday
	CRT < 2sec	30 ml q 4h
	PA - soft	4 bottle + 8 ori
		③ (R) to 7 bottle
		④ cont KMC, OMS, NNS

[Handwritten signature]
 Dr. Vijayanand



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order				
25/5/26						
	Nutrition Calculation					
	Highest wt - 2.143					
	Feed \rightarrow 30ml and hwy \rightarrow 360ml					
	MMF \Rightarrow 12mmf					
	Ossopan - P \Rightarrow 12ml \Rightarrow 300mg Ca, 480IU Vit D ₃ 132mg Poy					
	Vit - D ₃ \rightarrow 0.5ml \Rightarrow 400 IU Vit D ₃					
	Order \rightarrow 5mg					
	<u>cal</u> <u>pro</u>	<u>Ca</u> <u>Poy</u> <u>Fe</u> <u>Vit D₃</u>				
EBM	241.2	3.96	126	54	0.7	-
[87/1.1/35] [15/0.2/-]						
MMF	46	1.49	33.9	26mg	0.3mg	48 IU
[3.84/0.12] [2.83/2.17] [0.03/0.1]						
Ossop-	-	-	380mg	132mg	-	480 IU
Vit D ₃	-	-	-	-	-	800 IU
order	-	-	-	-	5mg	-
	287	5.36g	540mg	212mg	6mg	928 IU
Perly	133.9	2.5g	252mg	99mg	2.8mg	433 IU
	53.5:1		2.5:1			620 IU



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/5/26	Afternoon note.	
3PM	on RA, no distress HR - 170/min RR - 60/min SpO ₂ - 100%	Plan ① cont on RA ② TV = 170ml/kg/day 30ml q2h + 1gm mmf.
	taken bottle well. PA - soft rounded stools no vomiting	③ Day bottle night on ④ cont kcal, only NBS
①	ROP (21/5) - zone 3, no stage	→ EVO after 1 month
②	NR (23/5) - Hb - 8.6 Na - 136 Ca - 9.8 P₀₄ - 3.6 ALP - 108	3% NaCl @ 5ml/kg/day Oссopon D @ 150mg/kg vit D ₃ @ 200 IU/day orofer XT @ 3mg/kg
③	last TFT (6/4) - TSH - 11.63 fT ₄ - 1.64 T ₄ - 9.04	
④	NSU - DOLUS (2/4) - ①	



4

RESULT SHEET

Date	28/1/26	29/1/26	29/04	29/14	30/1/26	01/05
Time	8.26 Pm	3.12 Am	8.19 Am	9 PM.	7.57 Am	7.31 Pm
Hb				11.7		11.3
PCV				34.9		35.6
RBC				4.03		3.96
WBC				5.42		7.55
N/L				29/11.7		24.8/438
Platelets				384		384
CRP				41		58
ESR						=
PCT						
RBS						
Na			130		129	125
K			3.8		4.9	4.9
Cl			102		102	110
Ca/Mg	4.3/	6/	6.6/	7.2	8.1/	8.8/
Phosphate	14.4	9.9	8.4	6	5.3	4.8/
Urea	4					
Creatinine	0.7					
ALP						
SGPT						
SGOT						
T.Bill/Conj						
T.Protein						
S.Albumin						
S.Globulin						
A/G Ratio						
Uric Acid						
S.Amylase						
Sr.Lipase						
Blood Lactate						
S.Cholesterol						
PT/INR						
APTT						
CSF Protein / Sugar						
Cells						
N/L						

Date						
Time						
CUE - Alb						
CUE - Sugar						
CUE - Ketones						
CUE - PUS Cells						
CUE - RBC Cells						
CUE						
Stool Pus Cell						
OVA / Cyst						
Occult Blood						

Culture and Sensitivities :

.....

.....

.....

Radiology : USG :

 X-Ray :

 ECHO :

 CT :

 MRI

 Others (ECG, Contrast Studies etc.) :

EARLY WARNING SCORE: CHILDREN'S UNIT

Date:	Time:	8	10	12	2	4	6	8	10	12	2	4	6
Doctor/Nurse/Family Concern?		PM	PM	PM	PM	PM	PM	PM					
Temperature (F)		36.5°C	36.4°C	36.4°C	36.5°C	36.4°C	36.4°C	36.4°C	36.3°C	36.4°C	36.4°C	36.6°C	36.6°C
Heart Rate (bpm)		72	67	74	68	64	60	70	70	66	63	71	71
Blood Pressure (mmHg) *		(54) / 44	(59) / 54	(54) / 60	(45) / 34	(56) / 53	(28) / 82	(41) / 26	(40) / 28	(41) / 39	(59) / 66	(49) / 66	(47) / 34
Note: BP does not score in early warning scoring													
Heart Rate (Number)		192	160	160	158	162	151	144	146	154	165	154	154
Resp. Rate (bpm) (Over 1 Minute) *													
Resp Rate (Number)		39	49	69	44	40	54	76	65	54	71	52	52
Resp Distress	Mod/ Severe None / Mild												
Receiving O ₂ (l/min) O ₂ Saturations (%)		96%	99%	99%	98%	97%	96%	99%	97%	97%	97%	98%	98%
Conscious Level	Normal Altered	N	N	N	N	N	N	N	N	N	N	N	N
GCS *		C	C	C	C	C	C	C	2	C	C	C	C
TOTAL SCORE													
Number of shaded boxes		1	1	1	1	1	1	1	1	1	1	1	1
Pain Score						0	0	0	0	0	0	0	0
Observer's Initials		S	S	S	S	S	R	S	S	S	S	S	S

ACTIONS

Score 1	: Continue normal observation by staff nurse
Score 2	: Shift in charge nurse to be informed and continue hourly observations
Score 3	: Shift in charge AND ER doctor/Floor Registrar to see and half hourly to hourly Observation to continue.
Score 4	: Shift in charge AND treating consultant(till 8 PM) or On call night duty consultant to see
Score 5 & 6	: Shift incharge and PICU /NICU fellow or PICU/NICU consultant to be informed

NB: Scores 3 should be recorded overleaf

* NB: If GCS is below 12 or the Oxygen requirement is >3 Lit./min. , then irrespective of rest of the score, the Nurse MUST inform the PICU team.

CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

INSTRUCTIONS:

- The paediatric Early Warning Score i) seeks to identify the abnormal physiological finding seen during serious childhood illnesses and ii) offers a method to interpret such physiological derangements with clearly defined actions, ensuring that suitably experienced staff are involved with the care of the sickest children.
- The Early Warning Score does not replace clinical experience and acumen and should not be relied upon for such purpose.
- 6 clinical parameters are assessed and recorded as part of the child's routine clinical observation, providing a Early Warning Score between 0-6 (Higher Early Warning Score are seen in sicker children)
- Detailed actions are described according to increasing Early Warning Score.
- Some children with complex medical needs e.g. cyanotic heart disease may require modification to their trigger thresholds/ action plan- this should follow discussion with senior colleagues.
- Any Early Warning Score of 3 or above should be recorded below with details of any subsequent action initiated

Record Details when EARLY WARNING SCORE > 3			Record Time of Review and Plan		
Date	Time	Early Warning Score	Date	Time	Name

- If at any time additional help is required, call help – regardless of the Early Warning Score!
- Following a Early Warning Score assessment, senior help may be required

The SBAR communication tool (situation, background, assessment, recommendations) is a helpful mnemonic that can be used to describe a child's clinical condition to a colleague.

I	IDENTITY: I am (name), a nurse on ward (X). I am calling about (child X)
S	SITUATION: I am calling because I am concerned that ... (e.g. BP is low/high, pulse is XXX, Temperature is XX, Early Warning Score is XX)
B	BACK GROUND: Child (X) was admitted on (XX date) with (e.g. respiratory infection). They have had (X operation/ procedure/ investigation). Child (X)'s condition has changed in the last (XX mins). Their last set of observations were (XXX). The child's normal condition is ... (e.g. alert/ drowsy/ confused, pain free)
A	ASSESSMENT: I think the problem is (XXX) and I have ... (e.g. given O2/ analgesia, stopped the infusion), OR I am not sure what the problem is but child (X) is deteriorating, OR I don't know what's wrong but I am really worried.
R	RECOMMENDATION: I need you to ... come to see the child in the next (XX mins) AND Is there anything I need to do in the meantime? (e.g. stop the fluid/ repeat observation)



INFANT (<1 year)

Children's Observation & Early Warning Scoring Chart

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: Time: 8 10 12 2 4 6 8 10 12 2 4 6

Doctor/Nurse/Family Concern? AM AM PM PM PM PM

Temperature (F)	104																
	103																
	102																
	101																
	100																
	99																
	98																
	97																
	96																
	95																
	94																

Heart Rate (bpm) and Blood Pressure (mmHg) *	190																
	180																
	170																
	160																
	150																
	140																
	130																
	120																
	110																
	100																
	90																
	80																
	50																

Heart Rate (Number) 171 166 160 165 157 145 157 170 167 156

Resp. Rate (bpm) (over 1 Minute) *	70																
	60																
	50																
	40																
	30																
	20																
	10																

Resp Rate (Number) 53 68 34 32 44 38 34 51 68 32 30

Resp Distress Mod/ Severe None / Mild

Receiving O₂ (l/min) O₂ Saturations (%) 96% 98% 99% 99% 100% 95% 96% 97 95 94% 96% 96%

Conscious Level Normal Altered N N N N N N N N N N N N

GCS * C C C C C C C C C C C C

TOTAL SCORE																	
Number of shaded boxes	0	0	0	0	0	0	0	0	1	1	1	1	1	1	1	1	1
Pain Score	1	1	1	0	1	1	1	1	0	0	0	0	0	0	0	0	0
Observer's Initials	K	B	B	B	B	B	Z	Z	Z	S	S	S	S	S	S	S	S

- ACTIONS**
- Score 1 : Continue normal observation by staff nurse
 - Score 2 : Shift in charge nurse to be informed and continue hourly observations
 - Score 3 : Shift in charge AND ER doctor/Floor Registrar to see and half hourly to hourly Observation to continue.
 - Score 4 : Shift in charge AND treating consultant(till 8 PM) or On call night duty consultant to see
 - Score 5 & 6 : Shift incharge and PICU/NICU fellow or PICU/NICU consultant to be informed

* NB: If GCS is below 12 or the Oxygen requirement is >3 Lit./min. , then irrespective of rest of the score, the Nurse MUST inform the PICU team.

CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

INSTRUCTIONS:

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Record Details when EARLY WARNING SCORE > 3			Record Time of Review and Plan		
Date	Time	Early Warning Score	Date	Time	Name

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A	ASSESSMENT : I think the problem is (XXX) and I have ...(e.g. given O2/ analgesia, stopped the infusion), OR I am not sure what the problem is but child (X) is deteriorating, OR I don't know what's wrong but I am really worried.
R	RECOMMENDATION : I need you to ... come to see the child in the next (XX mins) AND I s there anything I need to do in the meantime ? (e.g. stop the fluid/ repeat observation)

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI 0 Y 2 M 12 D (M)
 11-03-2026
 Dr. VIJAYANAND JAMALPURI

24/03/26
 Doc. No. : RCH/ERN/CLINICAL/124

INFANT (<1 year)
Children's Observation & Early Warning Scoring Chart

Pratiksha Rainbow Children's Hospital
 It takes a lot to treat the little.

BirthRight
 BY RAINBOW HOSPITALS
 Your Right to a Safe Delivery

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: Time: 8 10 12 2 4 6 8 10 12 2 4 6

Doctor/Nurse/Family Concern? am am pm pm pm pm pm pm am am am am

Temperature (F)	104													
	103													
	102													
	101													
	100													
	99	36.0	36.0	36.0	36.0	36.0	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5
	98	*	*	*	*	*	*	*	*	*	*	*	*	*
	97													
	96													
	95													
	94													

Heart Rate (bpm) and Blood Pressure (mmHg) *	190													
	180													
	170													
	160													
	150	60	56	77			65	64	72	74	66	77	59	
	140													
	130													
	120	(57)	(50)	(63)			(47)	47	37	40	44	54	36	
	110													
	100	25	48	57			39	36	22	25	23	40	20	
	90													
	80													
	70													
60														
50														

Note:
 BP does not score in early warning scoring

Heart Rate (Number) 69 66 76 71 52 45 72 74 72 74 66 77 65 74

Resp. Rate (bpm) Over 1 Minute *	70													
	60													
	50													
	40													
	30													
	20													
	10													
	0													

Resp Rate (Number) 55 49 55 50 37 46 36 64 32 69 31 28

Resp Distress Mod/ Severe None / Mild

Receiving O2 (l/min) O2 Saturations (%) 97% 98% 97% 97% 97% 97% 98 + 97% 97% 97% 98% 98%

Conscious Level Normal Altered N N N N N N N N N N N N

GCS * C C C C C C C C C C C C

TOTAL SCORE														
Number of shaded boxes	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Pain Score	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Observer's Initials	B	B	K	K	K	K	S	S	S	S	S	S	S	S

ACTIONS	Score 1 : Continue normal observation by staff nurse
	Score 2 : Shift in charge nurse to be informed and continue hourly observations
	Score 3 : Shift in charge AND ER doctor/Floor Registrar to see and half hourly to hourly Observation to continue.
	Score 4 : Shift in charge AND treating consultant(till 8 PM) or On call night duty consultant to see
	Score 5 & 6 : Shift incharge and PICU/NICU fellow or PICU/NICU consultant to be informed

* NB: If GCS is below 12 or the Oxygen requirement is >3 Lit./min. , then irrespective of rest of the score, the Nurse MUST inform the PICU team.

CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

INSTRUCTIONS:

- The paediatric Early Warning Score i) seeks to identify the abnormal physiological finding seen during serious childhood illnesses and ii) offers a method to interpret such physiological derangements with clearly defined actions, ensuring that suitably experienced staff are involved with the care of the sickest children.
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- 6 clinical parameters are assessed and recorded as part of the child's routine clinical observation, providing a Early Warning Score between 0-6 (Higher Early Warning Score are seen in sicker children)
- Detailed actions are described according to increasing Early Warning Score.
- Some children with complex medical needs e.g. cyanotic heart disease may require modification to their trigger thresholds/ action plan- this should follow discussion with senior colleagues.
- Any Early Warning Score of 3 or above should be recorded below with details of any subsequent action initiated

Record Details when EARLY WARNING SCORE >3			Record Time of Review and Plan		
Date	Time	Early Warning Score	Date	Time	Name

- If at any time additional help is required, call help – regardless of the Early Warning Score!
- Following a Early Warning Score assessment, senior help may be required

The SBAR communication tool (situation, background, assessment, recommendations) is a helpful mnemonic that can be used to describe a child's clinical condition to a colleague.

I	IDENTITY: I am (name), a nurse on ward (X). I am calling about (child X)
S	SITUATION: I am calling because I am concerned that ... (e.g. BP is low/high, pulse is XXX, Temperature is XX, Early Warning Score is XX)
B	BACK GROUND: Child (X) was admitted on (XX date) with (e.g. respiratory infection). They have had (X operation/ procedure/ investigation). Child (X)'s condition has changed in the last (XX mins). Their last set of observations were (XXX). The child's normal condition is ... (e.g. alert/ drowsy/ confused, pain free)
A	ASSESSMENT: I think the problem is (XXX) and I have ... (e.g. given O2/ analgesia, stopped the infusion), OR I am not sure what the problem is but child (X) is deteriorating, OR I don't know what's wrong but I am really worried.
R	RECOMMENDATION: I need you to ... come to see the child in the next (XX mins) AND I s there anything I need to do in the meantime ? (e.g. stop the fluid/ repeat observation)



22/5/26

FLUID CHART

Sheet No.: 21

- All measurements in ml.
- Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.

Date	Time	Nature of Fluid	Intake			Output					IV Site Thrombophlebitis Score	Sign. Nurse	
			Mouth	NG	NG	NG	Diarrhoea	Vomit	Drainage	Urine			
	08:00 am			IV NS	NG								
	09:00 am	EBM + MMF			29ml					10ml			
	10:00 am												
	11:00 am	EBM + MMF			29ml					11ml			BJ
	12:00 pm												
	01:00 pm	EBM + MMF			29ml					12ml			
Total Intake :						Total Output :							
	02:00 pm												
	03:00 pm			✓									
	04:00 pm	EBM + MMF			29ml					10ml			BJ
	05:00 pm												
	06:00 pm	EBM + MMF			29ml					10ml			
	07:00 pm												
Total Intake :						Total Output :							
	08:00 pm												
	09:00 pm	EBM + MMF			29ml	Passed				10ml			BJ
	10:00 pm												
	11:00 pm	EBM + MMF			29ml	Passed				7ml			BJ
	12:00 am												
	01:00 am	EBM + MMF			29ml					6ml			BJ
Total Intake :						Total Output :							
	02:00 am												
	03:00 am	EBM + MMF			29ml	passed.				6ml			BJ
	04:00 am												
	05:00 am	EBM + MMF			29ml					6ml			BJ
	06:00 am												
	07:00 am	EBM + MMF			29ml					6ml			BJ
Total Intake :						Total Output :							
Total 24 hrs. Intake			138 cc/kg/day.			Total 24 hrs. Output			11.9 cc/kg/day				

FLUID CHART



23/5/26

2.1

Sheet No. :

1. All measurements in ml.
2. Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.
3. 24 hrs. total to be entered in the kardex in RED.

Date	Time	Intake				Output					IV Site Thrombo-phlebitis Score	Sign. Nurse	
		Nature of Fluid	Route			NG	Diarrhoea	Vomit	Drainage	Urine			
			Mouth	I.V	O.G								
	08:00 am												
	09:00 am	EBM			29ml			-		10ml			
	10:00 am												
	11:00 am	EBM	29ml					passed		9ml	0		
	12:00 pm												
	01:00 pm	EBM	29ml					-		10ml			
Total Intake :						Total Output :							
	02:00 pm												
	03:00 pm	EBM	29ml					-					
	04:00 pm												
	05:00 pm	EBM			29ml			passed		12ml	0		
	06:00 pm												
	07:00 pm	EBM			29ml					11ml			
Total Intake :						Total Output :							
	08:00 pm												
	09:00 pm	EBM + mmt			29ml			-		10ml			
	10:00 pm												
	11:00 pm	EBM + mmt			29ml			-		10ml			
	12:00 am												
	01:00 am	EBM + mmt			29ml					7ml			
Total Intake :						Total Output :							
	02:00 am												
	03:00 am	EBM + mmt			29ml					10ml			
	04:00 am												
	05:00 am	EBM + mmt			29ml					7ml			
	06:00 am												
	07:00 am	EBM + mmt			29ml					8ml			
Total Intake :						Total Output :							

Total 24 hrs. Intake	165 cc/kg/24hrs
-----------------------------	-----------------

Total 24 hrs. Output	1.9 cc/kg/day
-----------------------------	---------------

B/o P. Sandevaran
 19/05/26.

DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 68 PMA: 38 + 5

Term Preterm Gestation : 28 + 6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	VPT / VLBW ED	Hypocalcaemia
2.	VAP - Klebsiella	Hypophosphatemia
3.	CHD - grade 2	Tetany
4.	Hypoplasia	
5.		
6.		

Today's Weight : 2.007 (963gm)

OVERVIEW

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....FiO₂.....Oxygen : 9 L/min

Last CXR : SpO₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours:
 No Desat / No brady
 Intermittent Tachypnea
 SIB [⊕] mild.

CARDIO VASCULAR SYSTEM

Plan of Care :

SpO₂ - 98%,
 HR - 168/mn
 RR - 29/mn
 BP - 64/29 (42)

CNS

Neurological Examination :

Sedation..... -

Last Neurosonogram : Any Seizures..... -

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: ml/kg/hr Stools:

IV Fluids - Type of IVF: @ ml / hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination:

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	Sl.No.	Drugs	Days
		1.		
2.				
3.				

Caffeine 3.1 Nacl
vit-D3
Oxyfer XT
fortification

ossepand
*
Tobinys-D8

Plan of Treatment :

- 1) Continue HFNC - 2L
- 2) TV - 170cc/kg/day → 28ml @ 2H full caffeine + MMF 0.5g + 3.1 Nacl
- 3) Gas - once in a week
- 4) CRBS-OD
- 5) Do chesty @ 6th hourly
- 6) Monitor vitals.

Doctor's Name (Handover given) : N. Peatwren

Signature : N.P.

Date & Time : 18/05/26

Doctor's Name (Handover taken) : M. Ashwary

Signature : [Signature]

Date & Time : 18/05/26

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 2 M 8 D (M)
 Dr. VIJAYANAND JAMALPURI



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
19/5/26 9:50am		Seen by Dr. Vijayanand.
	→	HFNC - 1lit/min.
	→	Change respiratory tubings
	→	Stop Vitamin D3 drops
	→	Weekly review today.
	<p style="text-align: center;">↓ Prophylla</p> <p style="text-align: center;">Afternoon Round</p>	<p style="text-align: right;">Dr. VIJAYANAND JAMALPURI 11-03-2026</p> <p style="text-align: center;">Plan.</p>
19/5/26 2PM	<p>On HFNC - 1lit</p> <p>No sweat/beady.</p>	→ Continue HFNC - 1lit
	<p>Chlals</p> <p>HR - 142/min</p> <p>RR - 54/min</p> <p>SpO₂ - 99%</p> <p>BP</p>	→ TV - 170cc/kg/day 1st and 2nd only on feed.
	P/A - soft	→ Change resp tubings
		→ Monitor vitals
		→ Gas - once a week - RBS - OD

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI (M)
 11-03-2026 0 Y 2 M 8 D
 Dr. VIJAYANAND JAMALPURI



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
20/05/26 8:05 AM	MORNING NICOTIN Day 70 28+6 → 38+6	Plan
	① Very PT	① Total ff HFNC to low flow O ₂
	② ELBW	② Total Feeds 28ml/2hr
	③ CLD	③ KMC + NNS + OMS
	HFNC - 1lit/min No bradys/desats	④ DRUG CHART.
	Feeds - Full OG Tolerating.	
	Weight - 2.08kg T11g	
20/5/26	Afternoon Rounds	
	on low flow 0.5l/min tolerating well	Plan
	HR - 60/min	① cont low flow as needed
	RR - 35/min	② TV = 170ml/kg/day 28ml q2h O ₂ feeds
	SpO ₂ - 93%	③ wlt desats
	No retractions	④ KMC
	Tolerating feeds well.	NNS / cont
	PA - soft	OMS
	Passed stool	
	No vomiting	

Dr. VIJAYANAND JAMALPURI
 Reg. No: 40526

IAH-00650784 IP5-00171911
Baby Of P SANDHYA RANI
1-03-2026 0 Y 2 M 8 D (M)
Dr. VIJAYANAND JAMALPURI



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
20/8/21		Seen by Dr. Naleek
5:30pm		
		→ Continue low flow
		→ Reassess nursing of bleeding
		→ Continue kmc, oms
		NNS
		→ R/U CBG tomorrow
		x N/P2 <i>in room</i>

DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (NON-VENTILATED)

Day in NICU: Day of Life: 71 PMA: 29

Term Preterm Gestation: 28+6 Corrected Gestational Age: Today's Weight: 2050 (13g)

Problems		
S.No.	Current	Past Problems
1.	VPT / EBW	VAP - klebsiella
2.	CLD grade II	Hypocalcaemia Tetany
3.	Hypo spadias	Hypophosphataemia
4.		
5.		
6.		

Clinical Assessment
 low flow - 0.2l/min
 tolerating well
 comfortable in prone
 PA-sept-
 tolerating on
 HR-162/min
 SpO2-100%
 RR-45/min

Medications Used
 caffeine
 vit D3
 Oreprext
 Fortification
 37. Nacl
 oxycodan-A

Plan of Care:
 ① low flow was needed
 ② TT 770ml/kg/day → 29ml q2H on feeds
 ③ ④ paladain
 ④ cont KMC, OMS, NMS

Doctor's Name (Hand over given): Dr. Arshad Syed

Signature: [Signature]

Date & Time: 21/10/20

Doctor's Name (Hand over taken): Dr. Pasquale

Signature: [Signature]

Date & Time: 21/10/20

NEONATAL WEIGHT CHART

Birth Weight: **0.845kg** Admission Weight: Discharge Weight: NICU:

Date	Weight	Notes
10/13/26		
13/3		
14/3		
15/3		
16/3		
16/3		
18/3		
19/3		
20/3		
21/3		
22/3/26		
23/3/26		
24/3/26		
25/3/26		
26/3/26		
27/3/26		
28/3/26		
29/3/26		
30/3/26		
31/3/26		
1/4/26		
2/4/26		
3/4/26		
4/4/26		

0.85kg
 0.83kg
 0.80kg
 0.80kg

0.790
 0.790
 0.790

0.805
 0.815
 0.828

0.950
 0.95.5
 0.957

Subs. = 159gms
 weekly weight gain
 159gms

Wc = 28 Wc = 35 weekly weight gain

12/20/15 (100) *initial signs*

B.Wt - 895

H.R - 150

R.R - 40

B.P - 56/38 (91)

sPO₂ - 94%

RBS - 69 mg/dl

Temp - 99.1 F

Initial signs

12/20/15

100

895

150

40

56/38 (91)

94%

69 mg/dl

99.1 F

12/20/15

100

895

150

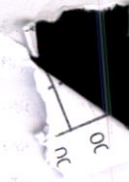
40

56/38 (91)

94%

69 mg/dl

99.1 F



BAM-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 2 M 6 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	18/3/26 <u>10:00 AM</u>	Seen by Dr. _____ Dr. Vijayanand
		<ul style="list-style-type: none"> ↓ HMC to 2 bottles continue tmc, nns weekly review.
	tubstep - day 7	Anesha
	9	[Signature]
		<p>Dr. VIJAYANAND JAMALPURI Reg. No. 40526</p>

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI (M)
 11-03-2026 0 Y 2 M 8 D
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
18/5/26 12:30pm	Nutrition Round	
	Max. wt - 1937g.	
	IV + 160 cc/kg/day ⇒ 310ml/day	
	2 HMF each feed ⇒ 12 Sachets	
	Syp. Ortopan D - 15ml, Orfer XT - 0.5ml, Vit D ₃ - 0.5ml	
	Cal Puro. Ca. Po ₄ ⁻ Fe ⁺² Vit D ₃	
EBM [67/11/35 15/04]	207. 3.4 108.5	46.5 0.6 -
HMF x12 [3.37/0.27/158 7.9/0.3/132]	40.4 3.24 189.6	94.8 3.6 1584.
Ortopan D (125/15/200)	- - 375	65 - 600.
Vit D	- - -	- - 400.
Orfer XT	- - -	- 5.7 -
Total	247.4 6.64 673.1	206.3 9.9 2584.
	127. 3.42 347	158.1 5.1 1334.
		<u>2:2:1</u>



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
19/3 3:33 PM		Seen by Dr. Vijaya sir
		- HFNC - 2Ltr.
		- TR - 170cc/kg/day
		full on feed
		1/2 hr - 1 hr - 2 hr - 3 hr
19/3/26 4 PM	Afternoon Round	
	on HFNC - 2lit	Plan
	No desat (brady)	→ Continue HFNC - 2lit
	Vitals	→ TR - 170cc/kg/day
	HR - 152/min	2.5ml/kg/hour
	RR - 42/min	full on feed
	SpO2 - 96%	→ Gas - once weekly
	P/A - soft	GRBS - OD
		Paps/hrs

Patient Sticker



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

IAH-00650784

IP5-00171911

Baby Of P SANDHYA RANI

1-03-2026

0 Y 2 M 8 D

(M)

Dr. VIJAYANAND JAMALPURI



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Your Right to a Safe Delivery

to P. Sandhyarani

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
13/05/26 11:30 pm.	Night Lando.	Seen by Dr. Nishu
	DOL-67 2876 → 3874.	Plan
	Baby on HFNC-2L	→ Continue HFNC-2L
	No Desat / No Breeds Intermittent Tachypnea ⊕	→ TV-170 c/min/day 28ml @ 2 hourly full on feeds + 0.5g mmf + 3.1. Pacl
Vitals:	SpO ₂ - 98% HR - 170/min	→ Gas - weekly once
	RR - 38/min.	- GRBS-ON
	BP - 65/30 (42)	- I/O charting 6M hourly
		Dr. N. Prathishu

Patient Sticker

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 2 M 8 D (M)
 Dr. VIJAYANAND JAMALPURI

cc. No. : RCH / FRM / CLINICAL / 124

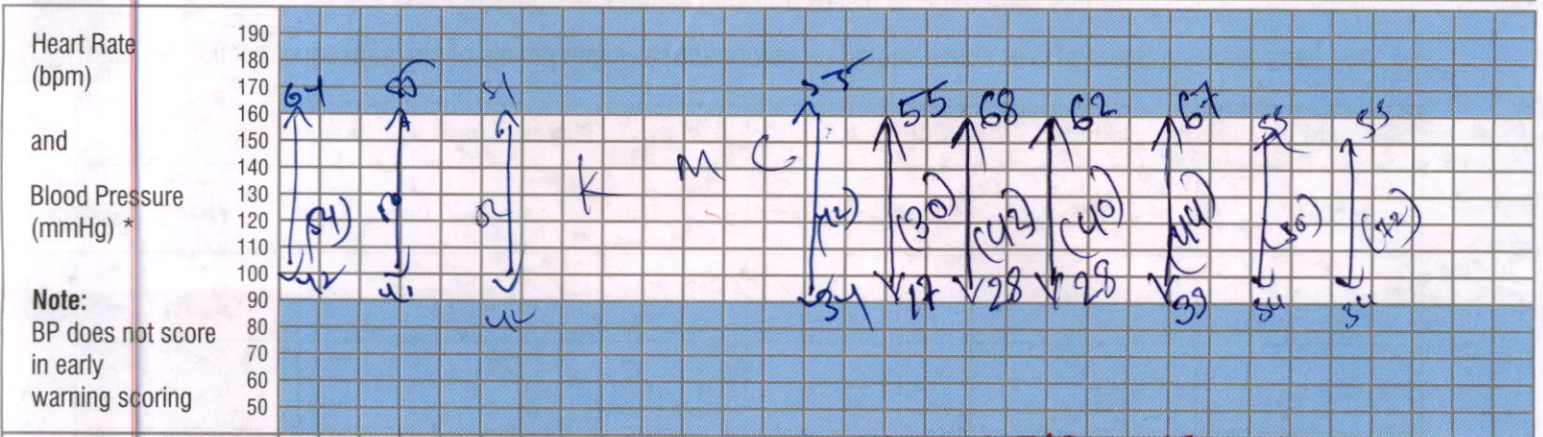
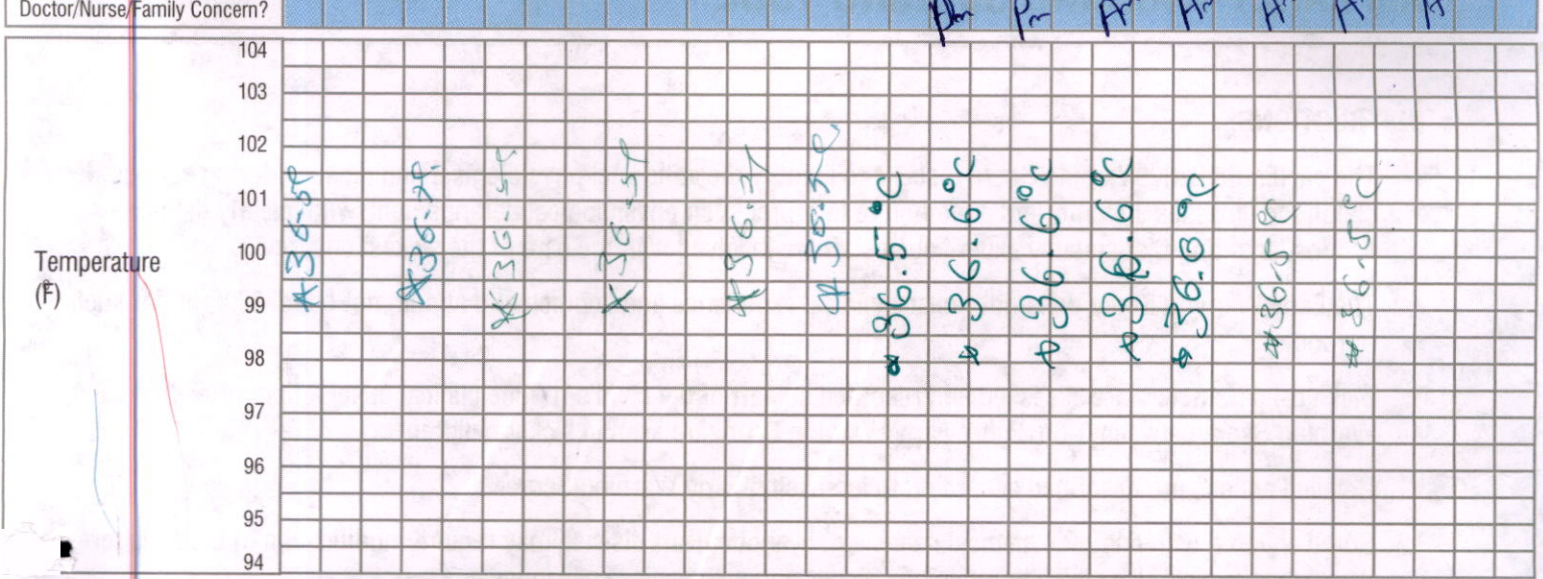
INFANT (<1 year)
Children's Observation & Early Warning Scoring Chart

Pratiksha
Rainbow Children's Hospital
 It takes a lot to treat the little.

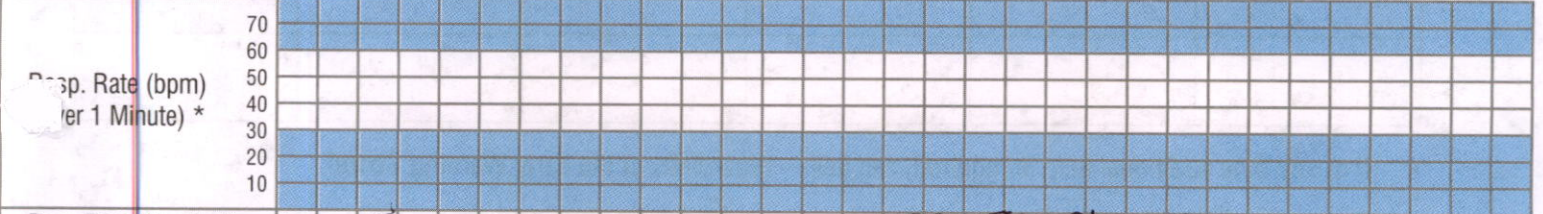
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EARLY WARNING SCORE: CHILDREN'S UNIT

Date: Time: 8 10 12 2 4 6 8 8 10 12 2 4 6 8
 Doctor/Nurse/Family Concern? P P A A A A A



Heart Rate (Number) 155 148 157 139 142 140 155 175 170 136 140



Resp Rate (Number) 38 56 38 58 39 42 73 75 31 57 59 60

Resp Distress Mod/ Severe None / Mild - - - - -

Receiving O₂ (l/min) O₂ Saturations (%) 99% 98% 98% 98% 98% 98% 100% 99% 97% 99% 98% 98%

Conscious Level Normal Altered - - - - - N N N N N N

GCS * C C C C C C C C C C C C

TOTAL SCORE Number of shaded boxes 0 0 0 0 0 0 0 0 0 0 1 1

Pain Score 1 1 1 1 1 1 1 1 1 1 0 0

Observer's Initials P C K R D B E R N S S

- ACTIONS**
- Score 1 : Continue normal observation by staff nurse
 - Score 2 : Shift in charge nurse to be informed and continue hourly observations
 - Score 3 : Shift in charge AND ER doctor/Floor Registrar to see and half hourly to hourly Observation to continue.
 - Score 4 : Shift in charge AND treating consultant(till 8 PM) or On call night duty consultant to see
 - Score 5 & 6 : Shift incharge and PICU /NICU fellow or PICU/NICU consultant to be informed

* NB: If GCS is below 12 or the Oxygen requirement is >3 Lit./min. , then irrespective of rest of the score, the Nurse MUST inform the PICU team.

CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

INSTRUCTIONS:

- The paediatric Early Warning Score i) seeks to identify the abnormal physiological finding seen during serious childhood illnesses and ii) offers a method to interpret such physiological derangements with clearly defined actions, ensuring that suitably experienced staff are involved with the care of the sickest children.
- The Early Warning Score does not replace clinical experience and acumen and should not be relied upon for such purpose.
- 6 clinical parameters are assessed and recorded as part of the child's routine clinical observation, providing a Early Warning Score between 0-6 (Higher Early Warning Score are seen in sicker children)
- Detailed actions are described according to increasing Early Warning Score.
- Some children with complex medical needs e.g. cyanotic heart disease may require modification to their trigger thresholds/ action plan- this should follow discussion with senior colleagues.
- Any Early Warning Score of 3 or above should be recorded below with details of any subsequent action initiated

Record Details when EARLY WARNING SCORE > 3			Record Time of Review and Plan		
Date	Time	Early Warning Score	Date	Time	Name

- If at any time additional help is required, call help – regardless of the Early Warning Score!
- Following a Early Warning Score assessment, senior help may be required

The SBAR communication tool (situation, background, assessment, recommendations) is a helpful mnemonic that can be used to describe a child's clinical condition to a colleague.

I	IDENTITY: I am (name), a nurse on ward (X). I am calling about (child X)
S	SITUATION : I am calling because I am concerned that ... (e.g. BP is low/high, pulse is XXX, Temperature is XX, Early Warning Score is XX)
B	BACK GROUND : Child (X) was admitted on (XX date) with (e.g. respiratory infection). They have had (X operation/ procedure/ investigation). Child (X)'s condition has changed in the last (XX mins). Their last set of observations were (XXX). The child's normal condition is ... (e.g. alert/ drowsy/ confused, pain free)
A	ASSESSMENT : I think the problem is (XXX) and I have ... (e.g. given O2/ analgesia, stopped the infusion), OR I am not sure what the problem is but child (X) is deteriorating, OR I don't know what's wrong but I am really worried.
R	RECOMMENDATION : I need you to ... come to see the child in the next (XX mins) AND I s there anything I need to do in the meantime ? (e.g. stop the fluid/ repeat observation)

AH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 2 M 5 D (M)
 Dr. VIJAYANAND JAMALPURI



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 66 PMA: 38+3
 Term Preterm Gestation : 28+6 Corrected Gestational Age:

Problems :			
	Current	Past Problems	
OVERVIEW	1.	VPT/VLBW/ RD.	Hypocalcemia
	2.	VAP - Klebsiella	Hypophosphatemia
	3.	CED - grade - 2	tetanus
	4.	Hypopadias	
	5.		
	6.		

Today's Weight :

RESPIRATORY SYSTEM	Ventilatory Support : <input type="checkbox"/> Yes <input type="checkbox"/> No - Day # of Vent :
	Mode of Ventilation : HFNC <input type="checkbox"/> CPAP <input type="checkbox"/> Conventional Ventilation : SIMV <input type="checkbox"/> A/C <input type="checkbox"/> VG <input type="checkbox"/> HFOV <input type="checkbox"/> iNO <input type="checkbox"/> PPM <input type="checkbox"/>
	Ventilator Settings : PIP.....PEEP.....VG.....Rate.....FiO ₂Oxygen :L/min
	Last CXR : Spo ₂ :
	ET Secretions : Clear <input type="checkbox"/> Thick <input type="checkbox"/> Yellow <input type="checkbox"/> Last ABG:
	Change over the Last 24 Hours..... <u>on HFNC - 3lit</u> <u>NO beady / desat</u>

CARDIO VASCULAR SYSTEM	Plan of Care : <u>HR - 154/min</u> <u>RR - 42/min</u> <u>spo₂ - 97%</u> <u>BP - 72/36(49)</u>
------------------------	---

CNS	Neurological Examination :
	Sedation..... Last Neurosonogram : <u>(N)</u> Any Seizures.....

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: ml/kg/hr Stools:

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination: *P/A - soft*

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	Sl.No.	Drugs	Days
		1.		Caffeine wit D3
2.		oxycodone		
3.		fibrinogen 3% NaCl		Tubing D5

Plan of Treatment :

- Continue HRNC - 3ut
Target SpO2 90-95%
- IV - 160cc/kg/day - 25ml 2ndly
+ 0.5g fibrinogen
+ 3% NaCl
- UAs - weekly once
- CRBS - OD
- Monitor vitals
- I/O charting 6thly

Doctor's Name (Handover given) : *Peepeta*

Signature : *[Signature]*

Date & Time : *12/5/20 8 AM*

Doctor's Name (Handover taken) : *Dr. Arjun*

Signature : *[Signature]*

Date & Time : *12/5/20 8 AM*

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 2 M 1 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
17/3/26 8:15am		Seen by Dr. Vijayanand
		→ Continue HFNC - 3lt
		→ Continue tmc OMS, NNS
	b Pooptite	
		<p style="text-align: right;">Dr. VIJAYANAND JAMALPURI Reg. No: 40526</p>
17/3/26 3pm	Afternoon Rounds.	
	On HFNC 3l/min tolerating well tmc ongoing RR-13/min SpO ₂ -97% RR-54/min	Plan ① cont HFNC 3l ② TU=1 bowl / 1/2 day 20ml @ 2A + 0.5gm fortification + 37.3 kcal
	tolerating feeds RA-soft	③ cas weekly once CRBS OD ④ 50 QOH
		<p style="text-align: center;">Dr. Vijayanand</p>

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI (M)
 11-03-2026 0 Y 2 M 1 D
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
18/3/26 2 AM	<u>NIGHT NOTES</u>	
	on HFNC 3l/min	<u>Plan</u>
	HR - 197/min	① cont HFNC
	RR - 38/min	3l/min
	SpO ₂ - 98%	② TV = 10ml/kg/day
	NO retraction	20ml q4h
	PA - soft	③ has weekly once
	tolerating feeds	CBC/D/S



18/3/26

DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : *67* PMA: *38+4*

Term Preterm Gestation : *28+6* Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	<i>NPT / VLBW / PD</i>	<i># Hypocalcaemia</i>
2.	<i>VAP - klebsiella</i>	<i>Hypophosphatemia</i>
3.	<i>CLD - grade 2</i>	<i>Tetany</i>
4.	<i>Hypospadias</i>	
5.		
6.		

Today's Weight : *1.937 (↑26 gm)*

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....FiO₂.....Oxygen :L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours..... *on HFNC - 3 liters*

NO brady

NO Desaturation

*last blood - 10/10/26
gas*

Plan of Care :

SpO₂ - 96%

PR - 151/min

PR - 140/min

Neurological Examination :

..... Sedation.....

Last Neurosonogram : Any Seizures.....

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input : / (+/-) Output : ml/k/d Urine Output : ml/kg/hr Stools :

IV Fluids - Type of IVF : @ ml / hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN : Yes No - If yes, details : Calories:

Abdominal Examination:

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

PLA - soft

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	Sl.No.	Drugs	Days
		1.	caffeine	3% Nacl
2.	Vit D3	Ossopan-D		
3.	osfer-27	Tubey-D7		
		fortification		

Plan of Treatment :

- continue HNC - 3lit liter
- target SpO2 - 90 to 95%
- Tr - 160ml/hr day → 25ml/hr baby
+ 0.5g mmf
+ 3% Nacl
- RBS OD
- Gas weekly once
- Ilo. charting 6th hourly.

Doctor's Name (Handover given) : *Dr. Sub*

Signature : *Sub*

Date & Time : *10/10/20*

Doctor's Name (Handover taken) :

Signature :

Date & Time :



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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 63 PMA: ~~38~~ 38

Term Preterm Gestation : 28+6 Corrected Gestational Age:

OVERVIEW	Problems :	
	S.No.	Current
1.	VPT/VUBW/RD	Hypocalcaemia +
2.	VAP- Klebsiella	Hypophosphatemia-tetany
3.	CLD - grade II	
4.	Hypospadias	
5.		
6.		

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....FiO₂.....Oxygen :L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours..... on HFNC 5L/min
tolerating well
No brady/tachy
comfortable in prone

CARDIO VASCULAR SYSTEM

Plan of Care :

HR - 158/min
SpO₂ - 96%
RR - 49/min

CNS

Neurological Examination :

Sedation :

Last Neurosonogram : N Any Seizures :

WRBS -

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input : / (+/-) Output : ml/k/d Urine Output : ml/kg/hr Stools :

IV Fluids - Type of IVF : @ ml/hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN : Yes No - If yes, details : Calories:

Abdominal Examination: soft, non distended

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION

Antibiotic	Sl.No.	Drugs	Days
	1.		
	2.		
	3.		

Handwritten notes in table cells:
 Caffeine, Vit B3, Orphen XT, Fortification, 37-Nall.
 Cesopran-D, 37-Nall reb, Tubnys D2.

Plan of Treatment :

1) cont HTNC 5ml/mc

2) T₁ = 160ml/kg/day → 2ml BHT + 0.5gm fortification + 37-Nall

3) aus once weekly
RBS OD

4) ~~Trace~~ ^{Trace} S/E, Ca, P₀₄, ALP c gas

5) I/O BHT

6) Next ROP on 21/5/26

Doctor's Name (Handover given) : Dr. Arunav

Signature : [Signature]

Date & Time : 14/5/26

Doctor's Name (Handover taken) : Dr. Manu

Signature : [Signature]

Date & Time : 14/5/26



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
14/5/26 10:30 AM	Seen by Dr. Vijayanand	Plan
		① HFNC 2l/min
	PO ₄ - 3.3	② Trace blood
	ALP - 579	③ weekly gas.
	Ca - 9.6	④ Ossopan-D
	NR - 134	2.5ml Q4H.
		⑤ KMC
		NNS
		⑥ Drug chart.
	 Dr. Vijayanand	 Dr. VIJAYANAND JAMALPURI Reg. No. 40526
14/5/26 1:20 PM	Afternoon Round.	Plan.
	on HFNC - 4lit/min.	
	No brady/desat.	
	Ulati	
	HR - 180/min.	→ Continue HFNC - 4lit/min
	RR - 52/min	Target SpO ₂ 90-95%
	SpO ₂ - 96%	→ TV - 160cc/kg/day
	BP - 72/37 (48)	25ml/2nd half
		0.5g fortification + 3% NaCl
	P/A - soft	
		→ Blood gas - once weekly
		→ CRBS - OD
		→ Monitor vitals

Proopley

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
14/5 06:19 PM	seen by Mr. Vijayendra's	
	Stable on HFNC ↓	
	tolerating feed ↓	
	↓ breast feeds	
14/5/26 11:45 AM	Night Rounds	Seen by Dr. Nilesh
	Stable on HFNC 4L	Plan: o Continue HFNC
	no Desat / Brady / Apnea	o Continue full feeds
	vitals: SpO ₂ - 95-100	Dr. Ramp
	HR - 150/min	
	RA - 54/min	
	BP - 70/35 (42)	
	NO Distress noted.	

BAH-00650784
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 2 M 1 D (M)
 Dr. VIJAYANAND JAMALPURI



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 64 PMA: 38+1

Term Preterm Gestation : 28th Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	<u>VPT/CLBW/RO.</u>	<u>Hypocalcaemia</u>
2.	<u>VAP - Klebsiella</u>	<u>Hypophosphatemia - tetanus</u>
3.	<u>UO - grade 2</u>	
4.	<u>Hypocalcaemia.</u>	
5.		
6.		

Today's Weight : 1.882 (25gm ↑)

OVERVIEW

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂..... Oxygen : 4 L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours.....
No Desat / No Ready.

CARDIO VASCULAR SYSTEM

Plan of Care :
CONTINUE HFNC.

CNS

Neurological Examination :

..... Sedation..... ✓

Last Neurosonogram : Any Seizures..... ✓

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input : / (+/-) Output : ml/k/d Urine Output : ml/kg/hr Stools :

IV Fluids - Type of IVF : @ ml / hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN : Yes No -If yes, details : Calories:

Abdominal Examination:
no distension

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	Sl.No.	Drugs	Days
		1.		Ceftazidime
2.		Vancomycin	3/1. Nal MS	
3.		Amphotericin B	7/6 Sep 17	
		Fluconazole	3/1. Nal	

Plan of Treatment :

1. Continue HFNC - 4L
2. TV - 160 ml/day → 25 ml @ 2H + 0.55 ml fat milk + 3.7. Nal
3. Cas - weekly once
4. ARBS - 00
5. Bio chaitij @ 6th hourly
6. ROP - 4/5/16
7. monitor vitals.

Doctor's Name (Handover given) : *N. Prathiba*

Signature : *[Signature]*

Date & Time: *15/9/16*

Doctor's Name (Handover taken) : *Dr. Anandya*

Signature : *[Signature]*

Date & Time: *15/9/16*

BAH-00650784 IP5-00171011
 Baby Of P SANDHYA RANI
 11-03-2026 OYOMODOH (M)
 Dr. VIJAYANAND JAMALPURI



EVENT CHART

Gestational Age:		Birth Weight:		
Date	Day	Problem	Treatment	Dr. Signature
11/3/26	D1		CPAP.	} Sreeja
11/3/26	D2	INR 2.1 APTT 22min	④ 1FFP	
11/3/26	D1	TLC 3.72 ANC=595	1G-CSF.	
12/3/26	D2	S-bil 9.3 =5.5	TSPIT given - SSPI	
			OR DOL-17 Reached Birthcut	

Blood Culture:

S.No	Date	DOL	Specimen	Findings	Antibiotics

Neurosonogram:

S.No	Date	DOL	Findings
①	14/3/	23	②

ROP Screening:

S.No	Date	DOL	Findings

2D ECHO:

S.No	Date	DOL	Findings

Thyroid Function:

S.No	Date	DOL	Findings

Hearing Screening: Date

Results:

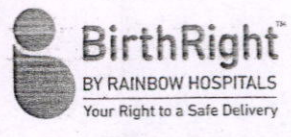
- Supplements:
- | | | |
|--------------|------------------|----------------------------|
| 1) Calcium | 2) Multivitamins | 3) HMF |
| 4) Iron | 5) Vitamin D | 6) 3% NaCl |
| 7) Vitamin A | 8) Caffeine | 9) Fluconazole Prophylaxis |



RBS CHART

Date	Time	RBS (mg/dl)	IVF %	Signature
11/3/26	1PM	64 mg/dl	10% Dex	R
11/3/26	6PM	118 mg/dl	10% Dex + feed	R
12/3/26	12AM	98 mg/dl	10% Dextrose	R
12/3/26	6AM	108 mg/dl	10% Dextrose	R
12/3/26	8PM	71 mg/dl	10% TPN	R
12/3/26	6PM	98 mg/dl	10% TPN	R
13/3/26	6PM	80 mg/dl	10% TPN	R
14/3/26	6AM	124 mg/dl	10% TPN	R
14/3/26	6PM	199 mg/dl	10% TPN	R
15/3/26		193 mg/dl	10% TPN	R
15/3/26	11:30pm	111 mg/dl	10% TPN	R
15/3/26	11PM	102 mg/dl	10% TPN + feed	R
16/3/26	6AM	100 mg/dl	10% TPN + feed	R
16/3/26	6PM	90 mg/dl	10% TPN + feed	R
17/3/26	6AM	92 mg/dl	10% TPN + feed	R
17/3/26	6PM	82 mg/dl	10% TPN + feed	R
18/3/26	6PM	90 mg/dl	10% TPN + feed	R
19/3/26	6AM	84 mg/dl	Full feed	R
20/3/26	6AM	112 mg/dl	Full feed	R
21/3/26	6AM	155 mg/dl	Full feed	R
22/3/26	6AM	130 mg/dl	Full feed	R
23/3/26	6AM	113 mg/dl	Full feed	R
24/3/26	6AM	78 mg/dl	Full feed	R
25/3/26	6AM	93 mg/dl	Full feed	R
26/3/26	6AM			
27/3/26	6AM	95 mg/dl	11	R
28/3/26	6AM	89 mg/dl	11	R
29/3/26	6AM	88 mg/dl	full feed	R

29/3/26
 \$



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 19 PMA : 31+4wks
 Term Preterm Gestation : 28+6wks Corrected Gestational Age :

Problems :		
S.No.	Current	Past Problems
1.	<u>VPT / ELBW</u>	<u>NNS</u>
2.	<u>RDS - 1^o Surfactant USA</u>	<u>Suspected Sepsis</u>
3.	<u>CPAP → HFNC</u>	
4.		
5.		
6.		

Today's Weight :

VENTILATORY SYSTEM

Ventilatory Support : Yes No - Day of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation: SIMV A/C VG HFOV INO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂..... Oxygen..... L/min

Last CXR : SPO₂.....

ET Secretions : Clear Thick Yellow Last ABG

Change over the Last 24 Hours changed from HFNC → CPAP
desaturations at
30% FiO₂
RD (+)

CARDIO VASCULAR SYSTEM

Plan of Care : SCR (+)
↓
HR = 159/min
RR = ~~88~~ 85/min
SPO₂ = 92%

CNS

Neurological Examination :

Sedation.....

Last Neurosonogram : (N) Any Seizures.....

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain Head Circumference

Input /(+/-) Output : ml/kg/d Urine Output ml/kg/hr Stools

IV Fluids - Type of IVF : @ ml/hr

Feeding : EBM Formula Donor BM Volume Frequency

TPN : Yes No - If yes, details : Calories :

Abdominal Examination : u/o

GRBS

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

PIA - soft, NO organomeg
Tolerating feeds well

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis Screen :

Blood Culture Urine Culture ET Culture Fungal Culture LP CSF :

INFECTION	Antibiotic	SI No.	Drugs	Days
		1.		Caffeine
	2.		3% NaCl	
	3.		Glycerine fortification	

Plan of Treatment :

- 1) Start CPAP - PEEP-6 with Rams cannula
Target SpO₂ 90-95%
- 2) NP₂, Gab - T/m (Monday)
- 3) Tu = 180mb/kg/day
3mb 2nd hrly + 1/2 Satchet HMF
- 4) No charting 6th hrly
- 5) Chest x-ray - Now
- 6) w/f - Apnea, desat

Doctor's Name (Handover given) Y. Sneha

Signature : Sneha

& Time : 29/3/26

Doctor's Name (Handover taken) Dr. Anurag

Signature : Anurag

Date & Time : 29/3/26



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
29/3/26		Seen by Dr. Nilesh
	↑ wgt = 90g	
	- multiple desaturate	1) Gas } NOW
	- on HFNC	NP2 } GRP
	- changed to CPAP	
		2) Trace chest xray for
		3) Stat 1 dose of lasix
		4) w/f - Brady, desaturat
		Inch
29/3/26	Afternoon Round	
	Baby on CPAP 6	Plan
	No brady / desat	
	Urtake	1) Continue CPAP-6
	HR - 178/min	Target SpO2 90-95%
	RR - 42/min	
	SpO2 - 96%	2) TV - 10ml/kg/day
		13ml/2nd half + 1/2 HR
	P/A - soft, non distended	3) w/f brady, desat
		Boyle

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
29/3/26 10:15pm	Night Round,	Seen by Dr. Nilesh
	On CPAP - 6cm. No desat/bleady.	→ Cont - CPAP
	ACF 871 PO ₄ - 3.2	→ 3% NaCl. 1ml in each feed 6.6 meq/kg/day
	Vitals HR - 152/min RR - 42/min SpO ₂ - 96%	→ Syp - Oxycodone D 125 mg/kg/day. [Ca ²⁺ - 125 mg] 1.5 ml PO/TID
	PIA - soft	→ Monitor vitals
		→ Col A bleady/desat
		→ NP ₂ gas - T/m

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
30/03/26 7:46 am	<u>Morning</u> • DOH - 20 • PHA → 28 + 6 → 31 + 5	<u>Adv.</u> - Continue CPAP - TV - 180 ml / ks / dm - 13 ml - 2hamb. + 1/2 sachet HMF
	TOW 0.950 (+3g)	- Continue supplement - Nutritional calculation Weekly review.
	- Baby on CPAP @ Gem	- W/F desat, brady apnea.
	- changed from HFNC → CPAP in mso in VO multiple desat on HFNC.	Rupraj..
	- Tolerating feeds.	✓ Seen by Dr VJ
30/03/26 10:00 am		• Continue CPAP • Blood gas - twice weekly • KMC • Weekly reviews. • Monitor electrolyte in gas. • Drug chart • TV - 180 cc / ks 14W at 2hamb - Daisy, feed diet to mother.

Dr. Vijayanand Jamalpuri
 Reg. No. 40524



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order																		
	Nutrition																			
	• DOH = 20																			
	• TFW = 9150g, 950 weekly wt gain																			
	✓ TV = 180 cc IVs/day = 168 ml																			
	✓ FAV =																			
	Fortification = 3 MMG (1g)																			
	Calculations																			
	<table border="0"> <tr> <td>✓</td> <td>✓</td> <td>✓</td> <td>✓</td> <td>✓</td> <td></td> </tr> <tr> <td>From EBM</td> <td>Cal</td> <td>Pro</td> <td>Cal</td> <td>PO4</td> <td>VIT D</td> </tr> <tr> <td></td> <td>112</td> <td>1.84</td> <td>59</td> <td>25.2</td> <td>0.33</td> </tr> </table>	✓	✓	✓	✓	✓		From EBM	Cal	Pro	Cal	PO4	VIT D		112	1.84	59	25.2	0.33	
✓	✓	✓	✓	✓																
From EBM	Cal	Pro	Cal	PO4	VIT D															
	112	1.84	59	25.2	0.33															
	MMF																			
	3.89 0.27 5.99 1.36 0.09																			
	<table border="0"> <tr> <td>11.67</td> <td>0.81</td> <td>18</td> <td>4.08</td> <td>-</td> <td>0.27</td> </tr> </table>	11.67	0.81	18	4.08	-	0.27													
11.67	0.81	18	4.08	-	0.27															
	Oscopan - D	<table border="0"> <tr> <td>112.5</td> <td>19.5</td> <td>180</td> </tr> </table>	112.5	19.5	180															
112.5	19.5	180																		
	<table border="0"> <tr> <td>123.67</td> <td>2.65</td> <td>136</td> <td>79</td> <td>180</td> <td>0.6</td> </tr> </table>	123.67	2.65	136	79	180	0.6													
123.67	2.65	136	79	180	0.6															
	<table border="0"> <tr> <td>Per Kg</td> <td>129.5</td> <td>2.78</td> <td>200</td> <td>89</td> <td>180</td> <td>0.69</td> </tr> </table>	Per Kg	129.5	2.78	200	89	180	0.69												
Per Kg	129.5	2.78	200	89	180	0.69														



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
20/03/26	<u>Afternoon</u>	<u>Adv</u>
	CPAP - e Ram's	- Continue
	- Baby on VENT - 6l/min Feet	- CPAP
	- Dist KME	
	- HP = 157	- R/u to add
	- SpO ₂ = 96	vit-D & iron.
	- PP = good	
	- No chest brady	- Continue KME
	- Feeding glt	- Continue Feeds
		14ml - 2 hourly - @ 180
		e/kg/day
		Ruprajal.
	seen by Vijayanand Sir	
		→ Continue CPAP
		gentle → Suction regularly
		→ Add OSSOPAN D QID (1.5ml)
		→ Vit D ₃ - 1ml OD
		→ Order XT drops. (3mg/kg)

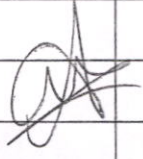
Dr. Vijayanand Jamaluri
 Reg. No. 40526
 (P.T.O.)



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
31/3/26 12:30 AM	<u>Night Notes</u>	
	on CPAP bcm.	<u>Plan</u>
	tolerating well	① cont CPAP bcm
	SpO ₂ - 97%	② IV = 180ml/kg/day
	RR - 45/min	12ml Q4H on feed
	HR - 163/min	③ cont KMC
	tolerating full feeds	④ gentle suctioning
	PA - soft, nondistended.	
		

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 6 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
19/4/26		
<u>10:40 AM</u>		
		Place:
		- ↓ HFNC to 4 l/min.
		- continue bull OG feeds.
		- continue KMC now
		- NP ₂ Tomorrow morning
19/4/26		
<u>5:00 PM</u>	Evening rounds	Anesha
		Dr. VIJAYANAND JAMALPURI Reg. No. 40526
	- on HFNC - 4 l/min	Place:
	- NO brady,	- continue HFNC
	- NO Desaturation	- w/f ↑ distress
	KMC given for 6 hours	- feed 18ml red haly
		full OG feeds
		- NP ₂ Tomorrow morning
		Anil

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
09/03/26 11PM	Night Rounds	
		Seen by Dr Sarat
		Plan
	Vitaly stable on HFNC	① cont HFNC 4l/min
	HR - 174/min	② TV = 40ml/kg/day
	RR - 56/min	USml q2H
	SpO ₂ - 100%	+ fortification + 3-2-Nad
		③ 0.5gm
	tolerating feeds	③ NB 2m
	PA - 50g	④ cont KMC

20/4/26.

BAH-0053028 IP5-00172155
Baby Of PAYAL ROY BARMAN
06-04-2026 0 Y 0 M 3 D (M)
Dr. MVB Pratyush



UNIT ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 40 PMA: 34+4

Term Preterm Gestation : 28+6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	VPT/ERBW/RDS	
2.	Metabolic Bone Disease	
3.	evolving Bronchopulmonary Dysplasia BPD	
4.	Anemia	
5.		
6.		

Today's Weight : 1-276 13gm ↑ 6gm weekly.

Respiratory System

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂..... Oxygen : L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours: on HFNC 4l/min
No brady/desat
comfortable in prone
with SRR (+)

Cardio Vascular System

Plan of Care : HR-120/min
RR-32/min
SpO₂-94%

CNS

Neurological Examination :

Sedation :

Last Neurosonogram : (2) Any Seizures :

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:
 Input: / (+/-) Output: ml/k/d Urine Output: ml/kg/hr Stools: 7+
IV Fluids - Type of IVF: @ ml/hr
 Feeding EBM Formula Donor BM Volume: 18ml Frequency: Q2H
 TPN: Yes No - If yes, details: Calories:
 Abdominal Examination: soft, non distended

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :
 Sepsis screen:
 Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	SI.No.	Drugs	Days
		1.		Adpms 3-7. Nacl
2.		Vit P3		
3.		oscepan D caffiene crofi XT		

Glycerine supp

Plan of Treatment :

- ① cont HFNC 4l/min
- ② TV = 170ml/kg/day → 18ml Q2H + fortification
+ 3-7. Nacl.
- ③ trace NP₂ reports
- ④ cont KMC, IONS, INNS
- ⑤ I/O Q2H
- ⑥ Gas once weekly.
GRBS ~~at~~ all days

Doctor's Name (Handover given) : Dr. Anamaya
 Signature : [Signature]
 Date & Time : 20/04/20

Doctor's Name (Handover taken) : [Signature]
 Signature : Rupanjali
 Date & Time : 20/4/20

16/4/26

DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 36 PMA: 34
 Term Preterm Gestation : 28+6 Corrected Gestational Age:

OVERVIEW	Problems :	
	S.No.	Current
1.	UPT / ELBW / RDS	
2.	RDS - MV - CPAP - HFNC	
3.	Metabolic bone disease	
4.		
5.		
6.		

Today's Weight : 1.243 Kg (↑ 23 gm)

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂..... Oxygen : 6..... L/min

Last CXR : Spo₂.....

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours.....

No Desaturation / Bradycardia / Apnea
SpO₂ - 97%
HR - 138/min
RR - 50/min

CARDIO VASCULAR SYSTEM

Plan of Care :

- 1) HFNC 6L → 5L/min.
- 2) KMC - continue.
- 3) PRN nursing
- 4) feeds - IV - 100cc/kg/day 18ml @ 2H OC feeds.

CNS

Neurological Examination :

Sedation..... N.O.

Last Neurosonogram : Any Seizures..... No.

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: 2.5 ml/kg/hr Stools:

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination:
No distension.

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	Sl.No.	Drugs	Days
		1.		
2.				
3.				

sup cefixime
only urine

Plan of Treatment :

- 1) Continue AFNC ~~at~~ → 5L/min.
- 2) IV - 170 cc (15) day 18ml e 24 to a feeds
- 3) Kmc - continue
- 4) Poone nursing

Doctor's Name (Handover given) : Dr Ashwari

Signature : [Signature]

Date & Time: 16/4/20

Doctor's Name (Handover taken) : N. Prathibha

Signature : [Signature]

Date & Time: 16/4/20



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
16/04/26 7:30 AM	Seen by Dr. Vijayanand. wt = 1.243 kgs ↑ 23 gm HFNC 6l/min	<u>Plan</u> ① HFNC SL ② KMC cont ③ OR feeds.
	<i>Dr. Ananya</i>	
16/04/26 1:20 PM	<u>Afternoon Rounds</u> on HFNC → 5l/min intermittent oxygen PIA → soft/tolerable feeds HR 163/ - RR 34/ - SpO ₂ 94%	<u>Plan</u> → continue HFNC → 5l/min → continue OR feeds orally → KMC continue → prone position → monitor vitals <i>Dr. P. Aravind</i>

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
<u>16/4/26</u>		<u>Seen by Dr VJ</u>
3:10 PM		Continue HFNC
		→ same
		H (PAUS)
<u>16/4/26</u>	night rounds	<u>cls to Dr Vinod</u>
9:30 PM	on HFNC	
	No desat, brady	→ continue HFNC
	intermittent tachypnea	→ continue OR feeds
	tolerates feeds	→ Room nursing
	HR - 164/min	→ monitor vitals
	RR - 63/min	H (PAUS)
	SpO2 - 95%	



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 37 PMA: 34+1

Term Preterm Gestation : 28+6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	• VPT / ELBW / RDS	
2.	• Metabolic Bone disease	
3.	• Anaemia	
4.	• Bronch BPD (and)	
5.		
6.		

Today's Weight : 1.270 ↑ 27gms.

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....FiO₂.....Oxygen :L/min

Last CXR : Spo₂.....

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours..... HFNC - 5L/m

NO desat brady

CARDIO VASCULAR SYSTEM

Plan of Care :

CNS

Neurological Examination :

..... Sedation.....

Last Neurosonogram : (P)..... Any Seizures.....

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input : / (+/-) Output : ml/k/d Urine Output : ml/kg/hr Stools :

IV Fluids - Type of IVF : @ ml / hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN : Yes No - If yes, details : Calories:

Abdominal Examination: *Soft, non distended*

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	Sl.No.	Drugs	Days
		1.		
		2.		
		3.		

*Syst capient
Glycerol*

Plan of Treatment :

- 1) Continue HFNC
- 2) Continue OR feeds
- 3) KMC
OMS / continue
NNS
- 4) monitor vitals

Doctor's Name (Handover given) : *Dr. Panigrahi*

Signature : *Panigrahi*

Date & Time: *12/04/26*

Doctor's Name (Handover taken) : *M. Banerjee*

Signature : *N. PZ*

Date & Time: *12/4/26*

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 2 D (M)
 Dr. VIJAYANAND JAMALPURI



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
<u>17/3/26</u>		Seen by Dr. VJ
<u>17/3/26</u>		→ Continue HFNC → sufficient
	1:200 → 200gms	→ KMC
		DMS NWS.
		Dr. VJ
	<u>Afternoon Results</u>	Dr. VIJAYANAND JAMALPURI Reg. No: 40526
<u>17/4/26</u>	ON HFNC - 5L/min.	PLN
IPM.	NO Desaturation / Seawly	1. Continue HFNC - 5L/min
	Intermittent Tachypnea ⊕	2. Continue oral feeds 18ml @ 2H (170ml/24hr)
	Vital: SpO ₂ - 96% HR - 160/min RR - 43/min	3. KMC, DMS, NWS Continue
	PIA - no distension	4. monitor vitals.
	Urine / passed. Stool	
	(KMC - 2 1/2 hours)	NBS suggest (N. Panturishu)

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI (M)
 11-03-2026 0 Y 1 M 2 D
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
17/4/26	Night exam	
11:30 am	DO HFNC 5L/min	
	intermittent Tachypnea @	
		<u>Plan</u>
	<u>Vitals</u> SpO ₂ - 97%	
	HR - 168/min	1) Continue HFNC
	RR - 47/min	
	BP - 54/28 (36)	2) Continue on feeds
	SRE @ mid	18ml @ 2H - 170cl/kg/day
	Plt - no dispersion	
		3) Continue KMC.
		4) monitor vitals
		(P. Pentoxifylline)



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 38 PMA: 34+2

Term Preterm Gestation : 28th Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	VPT/EEBN/KDS.	
2.	Metabolic bone disease	
3.	Anemia	
4.	Evolving BPD	
5.		
6.		

Today's Weight : 1.294 (1.24 gm)

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation: HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂..... Oxygen : 5 L/min

Last CXR : Spo₂.....

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours: Intermittent Tallypner @ mid 300
No Bradycardia / Desaturation
SpO₂ 96+

CARDIO VASCULAR SYSTEM

Plan of Care :
HR - 168/min
RR - 47/min
BP - 69/46 (35)

CNS

Neurological Examination :

Sedation..... No

Last Neurosonogram : Any Seizures..... No

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: ml/kg/hr Stools: *Small*

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination:
no distension.

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION

Antibiotic	Sl.No.	Drugs	Days
	1.		
	2.		
	3.		

*Add phos sachet
3% Nacl
vitamin D.
essence
calcium
ORSEPT*

any cause supporting

Plan of Treatment :

1. Continue AFNC 5L/MS
2. TV - 170ul/14/day → 180ml @ 2H or feeds
+ fortification + 3% Nacl.
3. Continue leuc. 11.2ml, NMS
4. monitor vitals

Doctor's Name (Handover given) :
N. Debnath

Signature :
N.D.

Date & Time:
18/4/20

Doctor's Name (Handover taken) :
Dr. Adhway

Signature :
[Signature]

Date & Time:
18/4/20



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
12/4/26 @ 9:40am	Very preterm ELBW Evolving CIP	<u>Seen by Dr. VS</u>
		1) Cont HFNC - 5l/min
		2) KMC NNS } to continue OMS }
		3) NP ₂ on Monday
		4) cling wrap temp. monitoring
18/4/26 1PM	Afternoon Rounds	
	on HFNC 5l/min tolerating well	Plan ① cont HFNC 5l/min
	HR - 175/min SpO ₂ - 98.7	② KMC OMS / to cont
	RR - 32/min KMC ongoing	NNS ③ NP ₂ on Monday
	tolerating feeds PA - soft, non distended	④ cling wrap ⑤ TV = 170ml / [y] day
		18ml q2H on feeds + fortification + 37. kcal

Dr. VIJAYANAND JAMALPURI
 Reg. No. 10526

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 6 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
18/02/24		Seen by Dr VJ
		→ continue HFNC @ 5l/min
		→ NP2 Monday

~~Admission Roster~~
 01965298pm
 18/02/24

18/02/24
 9pm
 Night Round
 on HFNC - 5lit
 No desat / beady.

Vitals
 HR - 161/min
 RR - 42/min
 SpO₂ - 100%
 BP - 54/27(35)

P/A - soft

- Plan
- 1) Continue HFNC - 5lit
Target SpO₂ 90-95%
 - 2) IV - 170cc/kg/day
18ml 2nd help full OG feed - fortification + 3% NaCl.
 - 3) NP2 on Monday
 - 4) 2/0 Charting 6th help
 - 5) Continue KMC, OMS, NWS
 - 6) Monitor vitals

Propilled
 Noted by
 SW Sharan

19/4/26

Patient Sticker

DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life: 39 PMA: 34+8

Term Preterm Gestation : 28+6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	VPT/ELBW/EDS	
2.	Metabolic Bone Disease	
3.	Anemia	
4.	Evolving BPD.	
5.		
6.		

Today's Weight : 1.279 (99gms) (↓15gms)

VENTILATORY SUPPORT : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....FiO₂.....Oxygen :L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours: ON HFNC - 5ut
No desat / brady -
Intermittent Sck (P)

Plan of Care : HR - 152/min
RR - 56/min
SpO₂ - 93%
BP - 83/38(42)

Neurological Examination :

Sedation.....

Last Neurosonogram : (P) Any Seizures.....

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: ml/kg/hr Stools:

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination: **TV - 170cc/kg/day**

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

P/A - soft

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION

Antibiotic	Sl.No.	Drugs	Days
	1.		
	2.		
	3.		

Addphox **crofu xT**
3% NaCl
vit D3
OxopropanD
Caffeine
Glycerine suppository

Plan of Treatment :

- Continue HFNC - 5lit/min
Target SpO₂ 90-95%.
- TV - 170cc/kg/day - 18ml 2adhely
effortication + 3% NaCl
- I/O charting 6thely.
- NP₂ on monday.
- ~~Atto~~ Continue KMC.
- Monitor vitals.

Doctor's Name (Handover given) : **Proopithe**

Signature : **[Signature]**

Date & Time: **19/4/26 Cam**

Doctor's Name (Handover taken) : **A. Anesh**

Signature : **[Signature]**

Date & Time: **19/4/26**

H-00650784 IP5-00171911
 Baby Of P SANDHYA RANI (M)
 11-03-2026 0 Y 0 M 30 D
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
<p>12/04/2026 9:40 am</p>		<p>Seen by Dr. UJ</p> <ul style="list-style-type: none"> cont HFNC - 4L/min KMC NNS OMS <p>to continue</p> <ul style="list-style-type: none"> NP₂] Monday GRAS] (T/M) <p>Weekly review T/M</p> <p>Rupanjali</p>
<p>12/04/2026 12:44 pm</p>	<p>Afternoon</p> <p>(*) Baby HFNC 4L/min</p> <p>few → No brady, desat e self pick</p> <p>→ HR = 130 RR = 25/min SPO₂ = 100%</p> <p>Feeds tolerated</p>	<p>Adv</p> <p>→ continue HFNC 4L/min → TV - 180cc/kg/day 19ml - 2 hourly OR feeds fortification</p> <p>→ GRAS - OD</p> <ul style="list-style-type: none"> NP₂] - Tomorrow GRAS] plan <ul style="list-style-type: none"> KMC NNS OMS <p>to continue</p> <p>W/P apnea, brady</p>

Noted by Rupanjali 12/4/2026 12:44pm


BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 0 M 30 D (M)
 Dr. VIJAYANAND JAMALPURI



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
12/04/26	Nigul rounds	Adv
8:00 pm		* continue HFNC
	- On HFNC - 5L/min	- 4L/min
	- Intermittent tachypnea	
	HR = 169	* TV - 180 cc/kg/dv
	SpO ₂ = 93%	- 10ml 2 hourly
	No Brady, desats episodes (+)	+ fortification
	Feeds tolerated. Self pick-up	+ 31. milk
		* W/F apnea, brady
		desat.
		* Labs
		NP ₂ in one
		GAS pick
		CRBS Tomorrow
		mornin
		Noted by Alphonsa 12/04/26 @ 8:30pm
		Rujind.

AH-00650784
 IP5-00171911
 OF P SANDHYA RANI
 2028 0 Y 1 M 0 D (M)
 JAYANAND JAMALPURI




DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 33 PMA: 33+4

Term Preterm Gestation : 28+6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	<u>VPT/ULIBN/RDS</u>	
2.	<u>PKS - Evolving CLS</u>	
3.	<u>Metabolic bone</u>	
4.	<u>disease</u>	
5.		
6.		

Today's Weight : 270 (16 gms weight gain)

Ventilatory Support : Yes No - Day # of Vent :
 Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM
 Ventilator Settings : PIP.....PEEP.....VG.....Rate.....FiO₂.....Oxygen :L/min
 Last CXR : Spo₂ :
 ET Secretions : Clear Thick Yellow Last ABG:
 Change over the Last 24 Hours: (on HFNC - 4L/min)
x NO bradycardia
x Desat (+) 1-2 episodes needing
to set up BSB 25% FiO₂

Plan of Care :
 • Oedema on dependant sides & g lower limbs
 • facial puffiness
 • No murmur, no gallop

HR = 160
RR = 40
SPO₂ = 98.1

Neurological Examination : (N)
 Sedation: (N)
Last Neurosonogram : (N)
 Any Seizures: (No)

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: ml/kg/hr Stools:

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination: P/A - soft

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	SI.No.	Drugs	Days
		1.		
	2.			
	3.			

Tubing → 13 days.

Plan of Treatment :

- Continue HFNC - 4L/min
- TU - 100 cc / kg / day - 18 ml - 2 hours + fortification + 3% NaCl (170 cc / kg / day)
- ↳ R/v ↓ in volume
- GAS
NP2
CRBS | Today - morning
- TRACE (R) Before Round
- & Weekly review.
- w/c Apnea brady dysr

Doctor's Name (Handover given) : Rupriya

Signature : Rupriya

Date & Time: 13/4/20

Doctor's Name (Handover taken) : Dr. Ananya

Signature : [Signature]

Date & Time: 13/4/20

DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 27 PMA:

Term Preterm Gestation : Corrected Gestational Age:

OVERVIEW	Problems :		
	S.No.	Current	Past Problems
1.	ERT / LBW / RDS		Suspected sepsis
2.	CPAP - HFNC - CPAP		
3.		HFNC	
4.	MBS		
5.			
6.			

Today's Weight : 6.10

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... Fig..... Oxygen : L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours..... on HFNC 6lit
No desat/beady

CARDIO VASCULAR SYSTEM

Plan of Care : HR 173/min CRBS - 2mg/dl
 RR 57/min
 SpO₂ 97%
 BP 65/36(32)

CNS

Neurological Examination :

Sedation.....

Last Neurosonogram : (N) Any Seizures.....

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input : / (+/-) Output : ml/k/d Urine Output : ml/kg/hr Stools :

IV Fluids - Type of IVF : @ ml / hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN : Yes No - If yes, details : Calories:

Abdominal Examination: *TV - 180 cc/kg/day*

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	Sl.No.	Drugs	Days
		1.		
2.				<i>Syp. Caffeine</i>
3.				<i>Orope XT</i>

3% NaCl Vit D3 Glycerine suppository

Plan of Treatment :

- Continue HFNC - blit
Target SpO2 90-95%
- TV - 180cc/kg/day \Rightarrow 17ml 2nd hely. + 0.5g fortification
Full OG feed.
- Trace free Tg.
- Continue kmc
- Do charting 6th hely
- Blood gas - once weekly
KBS - OD
- Monitor vitals

Doctor's Name (Handover given) : *Poojitha*

Signature : *[Signature]*

Date & Time : *7/4/26*

Doctor's Name (Handover taken) : *Dr Ashwath*

Signature : *[Signature]*

Date & Time : *7/4/26*

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 0 M 26 D (M)
 Dr. VIJAYANAND JAMALPURI



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
<u>2/11/26</u>		<u>Seen by Dr. VJ</u>
<u>2/11/26</u>		
		→ Continue with feeds
		→ IVC, NSG
		→ Trace for Ty report
		RAJ → NSG T/m.
<u>2/11/26</u>	<u>Afternoon</u>	<u>Ponds</u>
<u>12:30 PM</u>		<u>Plan</u>
	on HProc → btlr	
	no desat brady	→ Continue HProc → btlr
	Flax soft, tolerating feeds	→ IVC -
		→ NSG T/m
	HR - 168/r	→ Do overall Fee r/r
	RR - 38/r	→ Continue Dh feeds (and DD)
	SpO ₂ - 98/r	→ 5gm fortifac
		→ Gas once weekly
		CBC OD.
		→ monitor vitals
		Dr. VJ

Dr. VIJAYANAND JAMALPURI
 Reg. No. 40526

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
<p>2/11/26 8:30 PM</p>	<p><u>NIGHT ROUNDS</u></p>	<p><u>PLAN</u></p>
	<p>On HFNC @ 6 L/min</p>	<p>→ Continue HFNC @ 6 L/min</p>
	<p>SpO₂ ⊕</p>	
	<p>- Tachypnea ⊕</p>	<p>→ IV - 180cc (19/day)</p>
	<p>- No brady / decelerations</p>	
	<p>- Tolerating feeds well</p>	<p>→ Feeds - 17ml and hly</p>
	<p>Vitals - RR - 66/min</p>	<p>+ 0.5g MMF + 3% Nacl</p>
	<p>RR - 66/min</p>	<p>→ Gas - once weekly</p>
	<p>SpO₂ - 94%</p>	<p>→ ARBS ⊕</p>
		<p>→ w/ ↑ AwOB.</p>
		<p>brady, decelerations</p>
		<p>→ Monitor vitals</p>

noted by
 [Signature]
 7/11/26

00650784 IP5-00
 Y D P SANDHYA RANI
 03-2026 0 Y 0 M 29 D
 VIJAYANAND JAMALPURI (M)

DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 28 PMA: 32+6

Term Preterm Gestation : 28+6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	Very PT / VLBW / RDS	suop sepsis
2.	CPAP-HFNC - CPAP-HFNC	
3.	MBD	
4.		
5.		
6.		

Today's Weight : 1.172 (↑62g)

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂..... Oxygen : L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours: HFNC 6L/min / 21%
 comfortable in prone
 SUR (+)
 intermittent tachypnea (+)

Plan of Care : HR - 158/min
 SpO₂ - 100%
 RR - 70/min

Neurological Examination :

..... Sedation.....

Last Neurosonogram : (N) Any Seizures.....

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: ml/kg/hr Stools **f**

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: **17ml** Frequency: **Q4H**

TPN: Yes No - If yes, details: Calories:

Abdominal Examination: **soft, non distended**

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

TFT - T3 - 12.4
T4 - 9.64
TSH - 11.03
FT4 - 1.64

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	SI.No.	Drugs	Days
		1.		oscepan-D Fortification 0.9 Spp caffeine Orfer XT 37-Nall
2.				
3.				

Vit D₃ calcium supp

Plan of Treatment :

- ① cont HFNC 6l/min
 FiO₂ to target SpO₂ 90-95.
- ② TV = 180ml/kg/day - 17ml Q4H + 0.9 fortification
- ③ NSH to day
- ④ Gas once weekly
 RBS - OP
- ⑤ I/O Q4H.

Doctor's Name (Handover given) : **Dr Ashwary**

Signature : **[Signature]**

Date & Time: **8/2/26**

Doctor's Name (Handover taken) : **Sneha**

Signature : **[Signature]**

Date & Time: **8/4/26**

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 0 M 25 D (M)
 Dr. VIJAYANAND JAMALPURI



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
8/4/26 @ 10:26am	Doc-28	Seen by Dr. Vijayanand
		1) Cont HFNC - 6l/min
		2) N8G - today
		3) Gas once weekly.
		4) Rewrite drug chart
		<u>Adv</u>
8/4/26 3:00PM	- Baby on HFNC 6L/min	- Cont HFNC - 6L/min
	- On KMC comfortable	- TU - 180cc/kg/day 17ml - 2 hourly + 0.5g fortification
	- HR HR = 144 SPO ₂ = 98% RA = 50	- Gas once weekly.
		- KMC OMS] to continue
	- No apnea, brady event	w/F brady, apnea
		Noted Resp. Seizure activity 8/4/26 Ranjit

Dr. VIJAYANAND JAMALPURI
 Reg. No. 40526

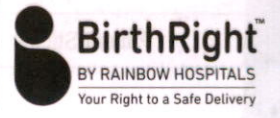


PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		Seen by Dr. VJ
8/4/26 16:14 hrs		Continue HFNC 6L/min
		KMC to esp continue
		Full feeds
		OG
		Trace NSU (2)
		Surjini
		<p style="text-align: center;">NIGHT ROUNDS</p> <p style="text-align: right;">Plan</p>
8/4/26	on HFNC → 6L/min	Continue HFNC 6L/min
	intermittent	Continue full feeds
	tachypnea (2)	monitor vitals
	Plt soft, tolerating feeds	NSU (2)
	HR 138/min	NSU (2)
	RR 62/min	NSU (2)
	SpO2 98%	NSU (2)
	NSU (2)	NSU (2)
	NSU (2)	NSU (2)
	NSU (2)	NSU (2)
	NSU (2)	NSU (2)
	NSU (2)	NSU (2)
	NSU (2)	NSU (2)

Dr. VIJAYANAND JAMALPURI
 REG. NO. 10526

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 0 M 25 D (M)
 Dr. VIJAYANAND JAMALPURI



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
<u>8/4/26</u>		Seen by <u>Dr. N. L.</u>
<u>23/4/26</u>		→ Continue HFAC → 6lt
		→ Full on feeds
		→ have nappy
		→ has one welly
		noted by Saniya @ 11:50 AM 8/4 @ 11:50 AM H (Rony)
<u>8</u>		

BAH-00650764 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 0 M 23 D (M)
 Dr. VIJAYANAND JAMALPURI



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
05/4/24		
10:15 PM	Night rounds	
	S/O Dr. Nilesh sir	Plm
	On CPAP - PEEP = 6, FiO ₂ = 24-25%.	Continue CPAP - B
No vomitngs.		<ul style="list-style-type: none"> • Lebs T/m → NP2 • TET • CRBS • Bloodges
		• TV = 180ml/kg/day.
		•
		Dr. Ranje
		Haled by Swager 5/4/26
		vop



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
06/04/26	Morning rounds	
6 am	DOA - 26 / 2876 → 2224 wt gain of 46 gm (1.098 kg) on CPAP PEEP 6; FiO ₂ 21% No Desat / Brady / Apnea	Plus 1) Continue CPAP PEEP 6 FiO ₂ 21%.
	vitals & SpO ₂ 96% HR - 154 / min BP - 67 / 41 (50) RR - 43 / min	2) IV - 180 ccrs / day 16.5 ml / 2H OG FBM + fortification @ 5% + 3% NaCl
	on FBM stool - passed v/o - 3.9 cc / kg / day NG aspirates - NBT.	3) Trace NP ₂ TIT Blood gases RBS
		4) set temp - 36.7°C.
		5) kmc; oms; NMS - continue
		P. Prathibha
		Moted by Swarnakshi 06/04/26

BAH-00650764 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 0 M 26 D (M)
 Dr. VIJAYANAND JAMALPURI



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
06/06/26	MORNING NR	
02hr		plan
		① HFNC 5L/min
		②. Weekly once blood gs
		③. KMC + NNS
		④. Weekly R/V
		⑤. Dmg chel
		⑥. Trace NR
		ETP
		Dr. VIJAYANAND JAMALPURI Reg No: 40526
6/9/26		
1:00 pm	Weekly review -	
	Hc 27.5	T.W = 1.098
	L = 36cc	
	Wt gain = 138g.	



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
6/4/26	<u>Nutritional calculation</u>	
	TV = 180 cc / kg / day	
	• 16.5 ml / 2 hours	198
	• MMF - 0.5 g / sach	
	Vit-D ₃ = 800 IU	
	Oral K ₂ = 0.25 ml	
	Ossopan-A = 1.5 ml QID	
	MMF = 1.6	
	<u>Adp</u>	
	From EBM	
	GF 1.1 35 15 0.2	cal Pro Cal Pou Fe Vit
		132.6 2.17 69.3 29.7 0.4
	MMF	
	3.89 0.27 5.99 1.36 0.09	23.3 1.62 36 8.16 0.59
	Ossopan	
		150 66 25 800
		800
		2.5
		156 3.78 235 103.86 3.47 1040
	Per kg →	141 3.44 232 94.4 3.1 94



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		<u>Adv</u>
	<u>Afternoon</u>	cont - HFNE - 5L/min.
6/4/26 1:30 pm	Baby on HFNE 5L/min.	- Feed - 16.5 ml - Shallow
	On KME Comfortable	- W/F apnea, brady desat
	- NO RD	- Cont KME, NNS
		- R/U TFT SAP ₂ Eurin (R)
6/4/26 3:15 pm		<u>Seen by Dr VJ</u>
		HFNE - 6L/min.
		- Addphos - 10 add
		- Ask FTy in same sample
		- Weekly once Capillary - gas.

BAH-00650784 IPS-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 0 M 23 D (M)
 Dr. VIJAYANAND JAMALPURI



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
6/4/26 - 7pm	<u>Night Round</u>	
	Baby is on HFNC-6lit No brady/desat.	
	<u>Vitals.</u>	<u>Plan.</u>
	HR - 170/min	
	RR - 42/min	1) Continue HFNC-6lit
	SpO ₂ - 99%	Target SpO ₂ 90-95%
	BP - 73/41 (53)	2) IV - 180cc/kg/day
	PIA - soft	1/2 17ml 2nd hely
		+ 1000 0.5g fortification
		3) Breast nursing
		4) Continue KMC
		5) Trace faculty report
		6) Monitor vitals

BAH-00650784 IP5-00171911
 Baby of P SANDHYA RANI
 11-03-2026 0 Y 0 M 23 D (M)
 Dr. VIJAYANAND JAMALPURI



DRUG CHART

Date of Admission: Drug Allergies: Not known any Drug Allergies

FOR THE SAFETY OF THE PATIENT

- GENERAL** - Ensure that all patient details are entered above. ONLY A DOCTOR SHALL WRITE MEDICATION ORDERS.
- DOCTOR** - Please use only approved abbreviations (refer to Hospital's approved list of abbreviations).
- Use approved pharmaceutical names, BLOCK LETTERS, metric dosage. English instructions.
 - Any changes in drug therapy must be ordered by a NEW PRESCRIPTION. Do not alter existing instructions.
 - Discontinue a drug by drawing a line **I** through it and a similar line through subsequent recording panels.
 - The date and time of stopping the drug along with the doctors name and sign must be mentioned.
 - Only one chart should be in use at any one time. When the chart is full, a new supplement can be kept within this drug sheet folder.
- NURSES** - Nurses must follow strictly the FIVE RIGHTS before administration of medication.
- 1) Right Patient 2) Right Drug 3) Right Dosage 4) Right Route 5) Right Time
- AVOID TAKING VERBAL ORDERS. NO VERBAL ORDERS FOR HIGH RISK/HIGH ALERT MEDICINES (EXCEPT FIRST DOSE OF EPINEPHRINE DURING CPR). Follow Hospitals's Verbal Order Policy.

SOS / PRN (As Required Medication)

DRUG :				Date															
				Time															
Dose	Route	Frequency	Start Date																
Doctor's Signature		Valid Period	Pharm.																
Additional Instructions:																			

DRUG :				Date															
				Time															
Dose	Route	Frequency	Start Date																
Doctor's Signature		Valid Period	Pharm.																
Additional Instructions:																			

DRUG :				Date															
				Time															
Dose	Route	Frequency	Start Date																
Doctor's Signature		Valid Period	Pharm.																
Additional Instructions:																			

VERIFIED BY : Name

REGULAR PRESCRIPTIONS

Weight: 0.845 Ward:



VERIFIED

VERIFIED

VERIFIED

VERIFIED

DRUG: ~~SMY (AFFEN)~~

Dose	Route	Frequency	Start Date	Date/Time
1mg	IV	OD	12/3/23	11/3, 14/3, 15/3, 16/3, 17/3, 18/3, 19/3, 20/3, 21/3

Name & Signature of the Doctor Starting the Drugs: *Par*

Additional Instructions: *smg/15/day*

Daily Doctor's Endorsement by a Sign: *[Signature]*

DRUG: ~~PIP~~

Dose	Route	Frequency	Start Date	Date/Time
85mg	SL	BD	12/3	12/3, 13/3, 14/3, 15/3

Name & Signature of the Doctor Starting the Drugs: *Rup*

Additional Instructions: *100mg/kg/dose*

Daily Doctor's Endorsement by a Sign: *[Signature]*

DRUG: ~~INT. FLUCANA~~

Dose	Route	Frequency	Start Date	Date/Time
5mg	SL	twice weekly	12/3	12/3, 13/3, 14/3, 15/3, 16/3, 17/3, 18/3, 19/3, 20/3, 21/3, 22/3

Name & Signature of the Doctor Starting the Drugs: *Rup*

Additional Instructions: *5mg/kg/dose*

Daily Doctor's Endorsement by a Sign: *[Signature]*

DRUG: ~~GLYCERINE~~

Dose	Route	Frequency	Start Date	Date/Time
0.3ml	PR	BD	14/3/23	14/3, 15/3, 16/3, 17/3, 18/3, 19/3, 20/3, 21/3, 22/3, 23/3, 24/3, 25/3, 26/3, 27/3, 28/3

Name & Signature of the Doctor Starting the Drugs: *[Signature]*

Additional Instructions: *0.3ml + 0.3ml NS*

Daily Doctor's Endorsement by a Sign: *[Signature]*

BAH-0065078 IP5-00171011

Baby Of P SANDHYA RANI

11-03-2026 0Y0M0D0H (M)

Dr. VIJAYANAND JAMALPURI

Weight: Ward:



		Date Time	Nurse Sig.	Nurse Sig.	Nurse Sig.	Nurse Sig.
DRUG :		Dose		Dose		Dose
		Dr. Sign.		Dr. Sign.		Dr. Sign.
Route	Start Date	Dose		Dose		Dose
		Dr. Sign.		Dr. Sign.		Dr. Sign.
Name & Signature of the Doctor		Dose		Dose		Dose
		Dr. Sign.		Dr. Sign.		Dr. Sign.
Additional Instructions:		Dose		Dose		Dose
		Dr. Sign.		Dr. Sign.		Dr. Sign.

VARIABLE DOSE		Date Time	Nurse Sig.	Nurse Sig.	Nurse Sig.	Nurse Sig.
DRUG :		Dose		Dose		Dose
		Dr. Sign.		Dr. Sign.		Dr. Sign.
Route	Start Date	Dose		Dose		Dose
		Dr. Sign.		Dr. Sign.		Dr. Sign.
Name & Signature of the Doctor		Dose		Dose		Dose
		Dr. Sign.		Dr. Sign.		Dr. Sign.
Additional Instructions:		Dose		Dose		Dose
		Dr. Sign.		Dr. Sign.		Dr. Sign.

STAT / ONCE ONLY DRUGS

Date	Time	Medication	Dosage & Other Instructions	Route	Signature	Nurses
11/3	1pm	Inj-vit K	0.5mg	IV	Sneha	[Signature]
11/3	1pm	Inj. caffeine citrate	20mg/kg	IV	Sneha	[Signature]
11/3	6pm	FFP	15ml/kg	Wound	[Signature]	
11/3	7pm	GCSF	10mg/kg	W	[Signature]	[Signature]
		1ml + 9ml 5% D, take 0.2ml + 2.8ml of 5% D	give near 3am	W	[Signature]	[Signature]
12/3	11am	CUROSURF	1.5ml	USA	Sneha	Dharath
12/3	6:30pm	FFP	15ml/kg	IV	Sneha	Dharath

VERIFIED BY Signature

I.V. FLUIDS CHART

Weight:

Ward:

Date	Time	Composition of I.V. Fluid (If Infusion, mention ml/hr = Mcg/kg/min. etc)	Route	Flow Rate ml/hr	Doctor Sign	Nurse Sign	Date of Stopping	Doctor Sign	Nurse Sign
11/3/20	1:30pm	TU = 10% Dextrose + 3ml/kg Ca. gluconate TU = 80ml/kg/day	IV	2.5ml	Sum	A	12/12/20	Sum	A
12/3/20	8AM	TU = 10% Dextrose + 3ml/kg Ca. glu TU = 80ml/kg/d	IV	2ml	Sum	A	10/10/20	Sum	A
12/3/20	8AM	Inj. Hep NS 1.5ml + 48.5ml 1/2 NS	IV	0.2	Sum	A	12/3	Sum	A
12/3/20	8AM	TU = 80ml/kg/d 10% TPN	IV	2.1	Sum	A	12/3	R	A
13/3	8AM	Inj. Hep NS 1.5ml + 48.5ml 1/2 NS	Picc	0.2	Sum	A	14/3	Sum	A
13/3/20	8AM	TU = 100ml/kg/d 10% TPN	Picc	3.6	Sum	A	14/3	Sum	A
14/3	8AM	Inj Hep NS 1.0ml + 48.5ml 1/2 NS	Picc	1cc/d	Sum	A	15/3	R	A
14/3	8AM	TU = 100ml/kg/d 10% TPN	Picc	1cc/d	Sum	A	15/3	R	A
15/3	8AM	Inj Hep NS 1.0ml + 48.5ml 1/2 NS	Picc	1cc/d	Sum	A	16/3	Sum	A
15/3	8AM	TU = 100ml/kg/day 10% TPN	Picc	1cc/d	Sum	A	16/3	Sum	A

VERIFIED BY : Name Signature



Sheet No: REGULAR PRESCRIPTIONS Weight 0.828kg Ward

DRUG : FORTIFICATION P				Date/Time	20/3	21/3	22/3	23/3	24/3	25/3	26/3	27/3	28/3	29/3	30/3	31/3
Dose	Route	Frequency	Start Dt.		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	change dose STOP
	PO	OD	20/3		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Sneha
Name & Signature of the Doctor Starting the Drugs:					✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Additional Instructions:					✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	31/3/20
1/2 Sachet (0.5g Sachet)					✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Daily Doctor's Endorsement by a Sign					✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	

DRUG : 5YPR. Caffeine Citrate				Date/Time	21/3	22/3	23/3	24/3	25/3	26/3	27/3	28/3	29/3	30/3	31/3	1/4	2/4
Dose	Route	Frequency	Start Dt.		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
0.2mg	PO	OD	20/3		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Name & Signature of the Doctor Starting the Drugs:					✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Additional Instructions:					✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
5mg/kg/dose					✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Daily Doctor's Endorsement by a Sign					✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	

DRUG : 3-1. NACL				Date/Time	25/3	26/3	27/3
Dose	Route	Frequency	Start Dt.		✓	✓	✓
0.7ml	PO	each feed	25/3		✓	✓	✓
Name & Signature of the Doctor Starting the Drugs:					✓	✓	✓
Additional Instructions:					✓	✓	✓
5mg/kg/dose					✓	✓	✓
Daily Doctor's Endorsement by a Sign					✓	✓	✓

DRUG : 3% NaCl				Date/Time	27/3	28/3	29/3	30/3
Dose	Route	Frequency	Start Dt.		✓	✓	✓	✓
0.7ml	PO	each feed	27/3		✓	✓	✓	✓
Name & Signature of the Doctor Starting the Drugs:					✓	✓	✓	✓
Additional Instructions:					✓	✓	✓	✓
5mg/kg/day					✓	✓	✓	✓
Daily Doctor's Endorsement by a Sign					✓	✓	✓	✓



Street NO:

REGULAR PRESCRIPTIONS

Weight ... 0.8

Ward

DRUG	Dose	Route	Frequency	Start Dt.	Date Time													
SYP OSSOPAN D	0.8ml	PO	TID	22/3	6am	27/3	28/3	29/3										
Name & Signature of the Doctor Starting the Drugs:					12 AM X 6 PM X Doze changed 29/03/26													
Additional Instructions:					5ml = 12mg 7.5mg/kg/day													
Daily Doctor's Endorsement by a Sign					[Signature]													
SYP OSSOPAN-D	1.5ml	PO	TID	29/3/24	6AM	30/3												
Name & Signature of the Doctor Starting the Drugs:					[Signature]													
Additional Instructions:					5ml = 12.5mg 12.5mg/kg/day													
Daily Doctor's Endorsement by a Sign					[Signature]													
3% Nacl	1ml	PO	each	30/3		30/3	31/3	1/4/24										
Name & Signature of the Doctor Starting the Drugs:					[Signature]													
Additional Instructions:					7meq/kg/day													
Daily Doctor's Endorsement by a Sign					[Signature]													
GLYCERINE	0.3ml	PR	BD	14/3	6am	30/3	31/3	1/4/24										
Name & Signature of the Doctor Starting the Drugs:					[Signature]													
Additional Instructions:					0.3ml + 0.3ml N/S													
Daily Doctor's Endorsement by a Sign					[Signature]													

VERIFIED BY: Name

VERIFIED BY: Name

VERIFIED BY: Name



Sheet No:

REGULAR PRESCRIPTIONS

Weight

Ward

DRUG : CYP OSSOPAN D				Date/Time	30/3	3/3														
Dose	Route	Frequency	Start Dt.																	
0.8m	PO	TID	30/03	6AM																
Name & Signature of the Doctor Starting the Drugs: T. Pavani				<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <p>Signature: <i>[Signature]</i></p> </div> <div style="width: 30%;"> <p>STOP</p> </div> <div style="width: 30%;"> <p>31/3</p> </div> </div>																
Additional Instructions: 100mg/kg/day																				
Daily Doctor's Endorsement by a Sign																				
DRUG : Vitamin D3 drop				Date/Time	30/3	3/3	14/4													
Dose	Route	Frequency	Start Dt.																	
1ml	ora	OD	30/03/26																	
Name & Signature of the Doctor Starting the Drugs: T. Pavani				<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <p>Signature: <i>[Signature]</i></p> </div> <div style="width: 30%;"> <p>6PM</p> </div> <div style="width: 30%;"> <p>8 8 8 8</p> </div> </div>																
Additional Instructions: 1ml - 800IU																				
Daily Doctor's Endorsement by a Sign																				
DRUG : DROFER XTDROP				Date/Time	30/3	3/3	14/4													
Dose	Route	Frequency	Start Dt.																	
0.25m	ora	OD	30/03/26																	
Name & Signature of the Doctor Starting the Drugs: T. Pavani				<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <p>Signature: <i>[Signature]</i></p> </div> <div style="width: 30%;"> <p>6PM</p> </div> <div style="width: 30%;"> <p>8 8</p> </div> </div>																
Additional Instructions: 3mg/kg/day																				
Daily Doctor's Endorsement by a Sign																				
DRUG : SYP OROFAN-D				Date/Time	31/3	19/4														
Dose	Route	Frequency	Start Dt.																	
10ml	PO	QID	31/3	6PM																
Name & Signature of the Doctor Starting the Drugs: Dr. Arundhathi				<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <p>Signature: <i>[Signature]</i></p> </div> <div style="width: 30%;"> <p>6PM</p> </div> <div style="width: 30%;"> <p>8 8 8 8</p> </div> </div>																
Additional Instructions: 0.15mg/kg/day 5ml = 15mg																				
Daily Doctor's Endorsement by a Sign																				

VERIFIED BY: M. Signature

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 0 M 21 D (M)
 Dr. VIJAYANAND JAMALPIJARI



Sheet No:

REGULAR PRESCRIPTIONS

Weight

Ward

DRUG :				Date Time																		
FORTIFICATION PLUS				3/3/24																		
Dose	Route	Frequency	Start Dt.																			
	PO	each feed	3/3																			
Name & Signature of the Doctor Starting the Drugs:																						
Additional Instructions:																						
→ 0.5g Satchet each feed																						
Daily Doctor's Endorsement by a Sign																						
DRUG :				Date Time																		
Dose	Route	Frequency	Start Dt.																			
Name & Signature of the Doctor Starting the Drugs:																						
Additional Instructions:																						
Daily Doctor's Endorsement by a Sign																						
DRUG :				Date Time																		
Dose	Route	Frequency	Start Dt.																			
Name & Signature of the Doctor Starting the Drugs:																						
Additional Instructions:																						
Daily Doctor's Endorsement by a Sign																						
DRUG :				Date Time																		
Dose	Route	Frequency	Start Dt.																			
Name & Signature of the Doctor Starting the Drugs:																						
Additional Instructions:																						
Daily Doctor's Endorsement by a Sign																						

VERIFIED BY : Name Signature



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 20 PMA: 31+5

Term Preterm Gestation : 28+6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	VPP / EUBW	NAS
2.	RDS - 1° w/ USA	swop sepr's
3.	CPAP - HFNC - CPAP	
4.		
5.		
6.		

OVERVIEW

Today's Weight : 0.958 18 gm

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂..... Oxygen : L/min

Last CXR : Spo₂.....

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours..... CPAP 6cm
No desats / distress

RESPIRATORY SYSTEM

Plan of Care :

HR - 162/min
SpO₂ - 98%
RR - 66/min

CARDIO VASCULAR SYSTEM

Neurological Examination :

..... Sedation.....

Last Neurosonogram : (N)..... Any Seizures.....

CNS

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:
 Input: / (+/-) Output: ml/k/d Urine Output: 3.5 ml/kg/hr Stools: ++
 IV Fluids - Type of IVF: @ ml/hr
 Feeding: EBM Formula Donor BM Volume: 13ml Frequency: Q2H @ 180ml/kg/day
 TPN: Yes No - If yes, details: Calories:
 Abdominal Examination: soft, non distend.

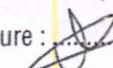
Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :
 Sepsis screen:
 Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	SI.No.	Drugs	Days	
		1.			
	2.				oreject
	3.				vit D3 37-Nal 1/2 0.5gm MMF

Plan of Treatment :

- ① cont CPAP bem
- ② TV = 180ml/kg/day
14ml Q2H or feed
- ③ cont KMC
- ④ gentle oral suctioning
- ⑤ w/f body lissat
- ⑥ (R) ↑ MMF

Doctor's Name (Handover given) : Dr. Ashwaje
 Signature : 
 Date & Time: 31/3/20

Doctor's Name (Handover taken) : Dr. Sneha
 Signature : 
 Date & Time: 31/3/20

AH-00650784 IP5-00171011
 Baby Of P SANDHYA RANI
 1-03-2026 0 Y 0 M 18 D (M)
 Dr. VIJAYANAND JAMALPURI

(71)



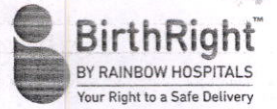
PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
21/8/26 @ 10:05	UPT/ELBW RDS	Seen by Dr. VS 1) Baby on CPAP PEEP - 6 flow 4L/min
		2) Blood gas - twice wtl
		3) Ti = 180ml/kg/day fortifica full Sachet 0.5g each feed.
		4) Cont. Supplement
		5) Thursday - NP ₂
		6) drug chart
		Sinha
31/8/26	Afternoon	Adv
1:30pm	On CPAP - 6cm 2 Rcm's	- Continue CPAP
	• NO desat, brady	- B Feeds → 14ml - 2hamb give OG full feeds (180cc/kg/day)
	MR = 153 SP _{O2} = 97	- Continue KME, BB
	- Feeds tolerating	- N/f apnea / brad, desat
		Rutish

Dr. VIJAYANAND JAMALPURI
 Reg. No: 40526

BAH-0650784 IP5-00171011
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 0 M 20 D (M)
 Dr. VIJAYANAND JAMALPURI

(a)



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
31/3/2026		Seen by Dr. VS
@ 5 PM		1) Continue CPAP
		PEEP - 6
		2) w/f - apnea, Brady
		desat
		Saeha
		Noted by
		SIS [Signature]
		31/3/26
	<u>Night/Round</u>	Seen by Dr



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
31/03/26 9:11 am	- Baby on CPAP @ 6 cm	<u>Adv</u> - Continue CPAP - 6cm
	No RD no desat brady	- TV - 180 cc/kg/day - 14 ml - 2kmls
	- HR = 170 - SpO ₂ = 93%	- Nasocean nasal drap
	O/E: Dry nasal crustings	- 2° BN - Gentle oro-nasal suction.
		- w/f apnea, brady & desat.
		Rupanjali

Patient Sticker



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 0 M 21 D (M)
 Dr. VIJAYANAND JAMALPURI



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 21 PMA: 31+6

Term Preterm Gestation : 28+6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	VPT ELBW RDS	NNS
2.	CPAP - HFNC - CPAP	Sepsis Sus.
3.		
4.		
5.		
6.		

Today's Weight : 957 -- 7900g (+)

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂..... Oxygen : L/min

Last CXR : Spo₂.....

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours.....

On CPAP - 6cm
No brady, desat

CARDIO VASCULAR SYSTEM

Plan of Care :

HR = 163
SpO₂ = 92
RA = 80/min

CNS

Neurological Examination :

..... Sedation.....

Last Neurosonogram : Any Seizures.....

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: ml/kg/hr Stools:

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination:

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION

Antibiotic	SI.No.	Drugs	Days
	1.		
	2.		
	3.		

Ossopam - D ^{Allyquin}
 Orofer X +
 vit - D + fortification
 3v. NaCl
 1/2 Ossopam

Plan of Treatment : Continue CPAD @ 6 am

TU → 130 cc/kg/day - 14 ml - 2 hourly
 + fortification
 (0.5g) full sachet

- Blood gas - weekly twice⁺
- UABs - OD
- ~~NP₂ ON Thursday~~
- R/V for ROP on Thursday @ 22 days.
- Continue KMI, OMS

Doctor's Name (Handover given) :
 Signature :
 Date & Time: 1/2/26

Doctor's Name (Handover taken) :
 Signature :
 Date & Time:

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 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 0 M 21 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
<p>7/4/26 10:24 am</p>	<p>o/E - Mild recession. HR - stable. CRT = 2 sec AV = good warm peripheries</p>	<p>Seen by Dr. VJ - continue CPAP - Gen - KMC to continue.</p>
	<p>moving all limbs spontaneously</p>	<p>ROP - T/M</p>
<p>01/4/26</p>	<p>Afternoon exam</p>	
<p>APM</p>	<p>21 days / 31+6 on CPAP No desaturation / Breaths / Apnea vitals: SpO₂ - 98.1 HR - 150/min RR - 42/min SLE - Cus - 1.5 x 0.8 PLA - soft no distension</p>	<p>Plan + continue CPAP Flow - 4 + FiO₂ - 180 cpm/day 14 ml @ 24 hourly + 0.5 gm fortification - GR BS - 00 + ROP - Tomorrow - MPZ Tomorrow - KMC, DML - continue.</p>

Rupak
 Dr. VIJAYANAND JAMALPURI
 Reg. No: 40526



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		Seen by Dr VS
11/4/26		
3 PM		① continue RAS CPAP
		② KMC
		③ Rop lowflow
		By
		Deformed
		noted by hys
		11/4/26 8 PM
	Night low	
	POL-21/28tb → 31tb.	Per
	on CPAP	
	No Desat / vomiting	Continue CPAP - flow 2L PEEP 8
		- N-180 cc/kg/day uml @ 2H
	Vitals: SpO2-99%	+0.5gm fortification.
	HR-150/min	- RBS-00
	RR-30/min	- ROP-1m
	Pls-soft, no distension	- KMC, OMS-continue.
	Urine passed	- monitor vitals
	Stool passed	
	NG aspirates - nil	

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 Baby Of P SANDHYA RANI (M)
 11-03-2026 0 Y 0 M 21 D
 Dr. VIJAYANAND JAMALIPIRI



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
1/4/22	B/O Sandhy Rani	
	Baby on CPAP - 6cm	
	Mamun advised to avoid	
	dairy	
2/4/26		Seen by Dr. Prathish.
		1) Cont. CPAP
		2)



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 22 PMA: (31+7) 32

Term Preterm Gestation : 28+6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	VPT / ELBW / RDS.	NNS
2.	CPAP-HFNC - CPAP	suspected sepsis.
3.		
4.		
5.		
6.		

Today's Weight : 0.953 (↓4gm)

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV INO PPM

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....FiO₂.....Oxygen : L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours.....

CPAP - PEEP 6 cm flow 2L.

CARDIO VASCULAR SYSTEM

Plan of Care :

SpO₂ - 98%.

HR - 140/min

RR - 40/min.

CNS

Neurological Examination :

..... Sedation.....

Last Neurosonogram : Any Seizures.....

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: ml/kg/hr Stools:

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination: *soft mild distension ⊕*

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	Sl.No.	Drugs	Days
		1.		
2.				
3.				

Plan of Treatment :

1. CPAP - flow - 7. PEEP - 6.
2. IV - 180 ml/kg/day. 214 ml O2AT to 5 gm fortification
3. RBS - 00
4. RSP - 10 day
5. penicillin continue.
6. monitor vitals.

Doctor's Name (Handover given) : *N. Prabhakar*

Signature : *N. Prabhakar*

Date & Time: *2/11/20*

Doctor's Name (Handover taken) :

Signature :

Date & Time:



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
2/4/2026 @ 9:30am	Morning Rounds	Seen by Dr. V.S.
	DOL-22	1) Cont CPAP PEEP 6
	VPT / ELBW	TV = 180 ml/kg/day
	RD	2) USG abdomen with doppler
		Neurological Screening
		3) ROP Today
		4) KMC to continue
		5) NSG on DOL-28
		6) monitor BP
		7) New drug chart
2/4/2026	Afternoon	Idu
	on EPAP - @ Gem	Continue EPAP PEEP 6
	FiO ₂ - 21%	TV - 180 ml/kg/day
	on KMC	14 ml - suam + fortifier
	NO AD, NO desat	- KMC + 3% nail - suam
		- W/F apnea, brady
		desat, BP - monitor
		Phojas

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
2/4/26 @ 3:55pm		Seen by Dr. Roathyan
		1) Cont - CPAP
		2) full OG feeds to continue
		Noted by Sby 2/4/26 @ 8:15
2/4/26 9pm	Night Rounds	
	Continue HFA CPAP with flow 7lt/min PEEP = 6.	
	No desat, brady No tachypnea	Plan:
		• Continue CPAP.
	0/E: HR = 120/min RR = 34/min SPO ₂ = 98% on CPAP	• TV = 180ml/kg/day, 4 feeds 14ml/2ndhly + fortification (OG feeds)
		• RBS - OD
		• KMC } to continue NNS
		• NSC on DOL = 28.
		• Monitor vitals.
		Dr. Ranj

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 Baby O P SANDHYA RANI (M)
 11-03-2026 0 Y 0 M 23 D
 Dr. VIJAYANAND JAMALPURI



MULTI ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 23 PMA: 32+1

Term Preterm Gestation : 28+6 Corrected Gestational Age:

Problems :			
	Current	Past Problems	
OVERVIEW	1.	VPT / ELBW / RDS	NNS
	2.	CPAP - HFNC - CPAP	Suspected sepsis
	3.		
	4.		
	5.		
	6.		

Today's Weight : 992g (T 399g)

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio₂.....Oxygen :L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours.....

CPAP → PEEP = 6
Flow = 7L/min

Plan of Care :

HR = 160/min
 RR = 50/min
 SpO₂ = 98% on CPAP
 BP = 73/

Neurological Examination :
CIA fair Sedation No

Last Neurosonogram : Any Seizures NO

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input : / (+/-) Output : ml/k/d Urine Output : ml/kg/hr Stools :

IV Fluids - Type of IVF : @ ml / hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN : Yes No - If yes, details : Calories:

Abdominal Examination:

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

PA : Soft / NT.

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

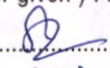
Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	Sl.No.	Drugs	Days
		1.		
2.				30% NaCl
3.				Cefuroxime Tubing - Dy.
				crofu x 7 drops - Incubator - DS
				Ossopan D syp.


Plan of Treatment :


- Continue CPAP with flow 7L/min PEEP = 6.
- TV - 180ml/kg/day @ 14ml 2nd hly feeds to 5gm fortification.
- RBS - OD
- KMC to continue NNS
- NSA on DOL - 28
- Monitor vitals.

Doctor's Name (Handover given) : Dr. RAMYA

Signature : 

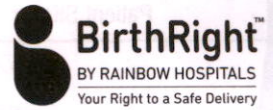
Date & Time : 2/4/26

Doctor's Name (Handover taken) : 

Signature : 

Date & Time : 3/4/26

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 0 M 21 D (M)
 Dr. VIJAYANAND JAMALPURI



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
3/21/26 @ 8:30		Seen by Dr. VS.
		1) on CPAP PEEP-6 Continue
		flow - 4l/min
		2) KMC - Continue.
		3) NSG on DOL-28
		Sneha
3/19/26		Adv
	→ Baby on RA CPAP - 6cm	- Continue CPAP PEEP-6
	→ on KMC	- TV - 180 cc/kg/day.
	→ MR-155 SPO ₂ = 99%	- 14ml shunt. feeds - + fortification.
	⇒ No RD, No desat	- KMC / to continue OMS
		- NSG - on DOL
		- 28
		Rupjae.

Dr. VIJAYANAND JAMALPURI
 Reg No: 40526

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI (M)
 11-03-2026 0 Y 0 M 23 D
 Dr. VIJAYANAND JAMALPURI

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
3 hrs		seen by Dr. VJ
7:30 AM		<u>Plans</u>
		— continue CPAP PEEP-6
		— full OG feeds
		hub
	P10x	

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 0 M 24 D (M)
 Dr. VIJAYANAND JAMALPURI



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 24 PMA: 32+2

Term Preterm Gestation : 38+6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	<u>NPT / ELBW</u>	<u>NNI</u>
2.	<u>Evolution C/P</u>	<u>RDS - 1^o surfactant USA</u>
3.		
4.		
5.		
6.		

OVERVIEW

Today's Weight : 1.026 (↑34g)

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂..... Oxygen :L/min

Last CXR : Spo₂.....

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours..... Baby on CPAP PEEP - 6

No Bradycardia / desaturation

on FiO₂ - 21%

RESPIRATORY SYSTEM

Plan of Care :

HR = 160/min

RR = 53/min

SpO₂ - 100%

CARDIO VASCULAR SYSTEM

Neurological Examination :

Sedation.....

Last Neurosonogram : (N) Any Seizures.....

CNS

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input : / (+/-) Output : ml/k/d Urine Output : ml/kg/hr Stools :

IV Fluids - Type of IVF : @ ml / hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN : Yes No - If yes, details : Calories:

Abdominal Examination:

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	Sl.No.	Drugs	Days
		1.		
2.				
3.				

Ossopan - D 3% Nard
 fortification Glycerin
 Syp. caffeine citr Vit B₃
 Orojel x 1 deope

Plan of Treatment :

- 1) Cont on CPAP PEEP - 6
Target SpO₂ 90-95%
- 2) K v - 180ml/kg/day
15ml 2nd hourly + 0.5g fortification
- 3) KMC }
ONS } to con r
- 4) NSG - ORDO L-28.
- 5) NP₂ }
TFT } on monday
Bloodgas
- 6) w/f apnea, Brady, desat

Doctor's Name (Handover given) : Y. Socha
 Signature : Socha
 Date & Time : 4/4/2026

Doctor's Name (Handover taken) : Socha
 Signature :
 Date & Time :

IP5-00171911
 3AH-00650784
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 0 M 23 D (M)
 Dr. VIJAYANAND JAMALPURI



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
4/4/26 @ 9:30 am	DOL-24 28+6 → 32+2 UPT/EIBW Evolving CID	Seen by Dr. VS
	Tidy wt 1.026 (↑34g)	1) Cont. CPAP PEEP-6 2) KMC OMG
	Baby on CPAP PEEP-6	3) NB ₂ } - on Monday TFT } Bld. gas }
		4) Weekly once - Blood gas
		5) NBG on DOL-28
		6) Drug chart <i>Sneha</i>
4/21/26	<u>Afternoon Rounds</u>	<u>Plan</u>
	Baby on CPAP PEEP-6 FiO ₂ - 21% Flow - 6 7 l/min	1) Cont CPAP PEEP-6 flow 7 l/min
	No Resp distress No Bradycardia No desaturation	Target SpO ₂ 90-95

Dr. VIJAYANAND JAMALPURI
 REG. NO. 40526

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 0 M 23 D (M)
 Dr. VIJAYANAND JAMALPURI



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	<p><u>vitals</u></p> <p>HR = 160/mcu</p> <p>SPO₂ = 99%</p> <p>RR = 39/mcu</p> <p>BP = 60/31 (cu)</p> <p>PIA - Soy 1</p>	<p>2) NP₂</p> <p>TFT</p> <p>Blood gas</p> <p>on Mondays</p> <p>3) NSG on DOL-28</p> <p>4) Weekly once Blood gas</p> <p>5) No chatting 8th hrly</p>
		<p><u>Sreha</u></p>
<p>4/4/26 1:42 pm</p>	<p><u>Afternoon</u></p> <p>ON</p> <p>⊙ HEP CPAP - 6 cm</p> <p>- NO Apnea, brady, desat</p> <p>- NO saeny cordia</p> <p>- Feeds tolerated</p>	<p><u>Adv</u></p> <p>- cont CPAP - 6</p> <p>- TV - 180 cc/kg/day</p> <p>ISme - 2 hourly</p> <p>+ fortification +</p> <p>3% wael</p> <p>- NP₂</p> <p>- TFT</p> <p>Capillary gas (weekly once)</p> <p>- W/F apnea</p> <p>brady & desat</p>
	<p><u>Noted by Chandana 4/4/26</u></p>	<p>Monday</p> <p><u>Rupak (P.T.O)</u></p>

EAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 0 M 24 D (M)
 Dr. VIJAYANAND JAMALPURI



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 25 PMA: 32+3

Term Preterm Gestation : 28+6 Corrected Gestational Age:

OVERVIEW	Problems :	
	S.No.	Current
1.	<u>VPT / VLBW</u>	<u>NNJ</u>
2.	<u>Evolving CLD</u>	<u>RDS-1's</u>
3.		
4.		
5.		
6.		

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....FiO₂.....Oxygen :L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours.....

on CPAP 6cm by Ram's cannula.

No brady, no desat

CARDIO VASCULAR SYSTEM

Plan of Care :

HR = 160/min
SPO₂ = 96%
RR = 46

CNS

Neurological Examination : (N)

..... Sedation.....

Last Neurosonogram : (N) Any Seizures..... (NA)

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input : / (+/-) Output : ml/k/d Urine Output : ml/kg/hr Stools :

IV Fluids - Type of IVF : @ ml / hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN : Yes No - If yes, details : Calories:

Abdominal Examination:

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

Stools passed

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	Sl.No.	Drugs	Days
		1.		
2.				
3.				

Ossopan-D 3% nail
 fortification vit-D3
 Syp caphion &
 orofer x T glycerin

Plan of Treatment :

- Continue CPAP @ 6cm - w/E for nasal septal injun
- IV - 100 cc/kg/day - 15ml - slowly + fortification + 3% nail

NP₂
 TFT
~~CRP~~ gm.
 CRBS

Monitor

KML, @M, WNS to continue

rest w/f apnea, brady derad.

Doctor's Name (Handover given) :
 Signature :
 Date & Time:

Doctor's Name (Handover taken) :
 Signature :
 Date & Time:

BAH-00650784 IP5-00171911
 Baby O P SANDHYA RANI (M)
 11-03-2026 0 Y 0 M 23 D
 Dr. VIJAYANAND JAMALPURI

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
<u>5/4/26</u>		
	C/S/b	Dr. Vijay Anand
<u>7:30 AM</u>		AI
		① continue CPAP
		② KMC
		③ NPL
		TFT
		Bloodgas
		CRBS
		on Monday/ Tomorrow
		④
		Noted by S/Anand 5/4/26
<u>5/4/26</u>		S/S Dr. Nitesh
<u>12:15 pm</u>	Wt gain 9.26 gm 1.05 gm	
		• Continue CPAP Flow = 6l/min
		• NPL
		• TFT } T/M
		• CRBS }
		• Bloodgas
		• KMC to continue
		• set temp 36.7°C.
		S/Anand

Dr. VIJAYANAND JAMALPURI
 Reg. No: 40526

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
05/4/26 5 PM	<p>⊙</p> <p><u>Afternoon rounds</u></p> <p>DOB- 25/2876 → 3273</p> <p>1.05287</p> <p>On PEEP CPAP</p> <p>PEEP-6, FiO₂-24 → 21 (1/2)</p> <p>Vital: SpO₂-95%</p> <p>HR-160/min -130</p> <p>RR-61/min</p> <p>BP-76/50 (58)</p> <p>On ECM.</p> <p>No vomiting</p> <p>NG aspirates - nil</p> <p>urine) passed</p> <p>Stool)</p> <p>PA soft in distension</p>	<p>play</p> <p>Continue CPAP PEEP 6cm, FiO₂ 21%</p> <p>Reset</p> <p>2) IV - 180cc/kg/day 15ml @ 2H OG EBM Fortification 0.5gm + 3.1 NaCl</p> <p>3) NP2 TFT GAS Blood gas</p> <p>4) knee only NMS</p> <p>5) Ser temp. 36.7°C.</p> <p>(N. Prastish)</p>

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 0 M 28 D (M)
 Dr. VIJAYANAND JAMALPURI



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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 29 PMA: 33

Term Preterm Gestation : 28+6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	Very PT / VLBW / RDS	
2.	Evolving CLD	
3.	MBS	
4.		
5.		
6.		

OVERVIEW

Today's Weight : 1.202 (↑30g)

Respiratory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....FiO₂.....Oxygen :L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours: (On HFNC - 6L/min)

- No apnea, brady, desat
 - Intermittent tachypnea

RESPIRATORY SYSTEM

Plan of Care :

- HR = 160
- SpO₂ = 97%
- RR = 70
- BP = 59/35

CARDIO VASCULAR SYSTEM

Neurological Examination : Sedation.....

Last Neurosonogram : Normal 28 Any Seizures.....

CNS

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input : / (+/-) Output : ml/k/d Urine Output : ml/kg/hr Stools :

IV Fluids - Type of IVF : @ ml / hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN : Yes No - If yes, details : Calories:

Abdominal Examination:

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

..... *Feeds tolerated*

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	SI.No.	Drugs	Days
		1.		
2.				Syp caffeine
3.				Orapaxfer KT B.I. NaCL

Vit + D3
Glycerin
supposite

Plan of Treatment :

Plan

✓ Continue HFNC - 6L/min

✓ W/F Apnea brady desat

✓ TV - 180cc / kg / day - 17ml + Fortification
- 2hamb

✓ GAS - once weekly

✓ KMC
Ⓞ MS
NNⓄ

W/F apnea brady desat

Doctor's Name (Handover given) : *(Signature)*

Signature : *Ruparaj*

Date & Time : *9/4/26*

Doctor's Name (Handover taken) : *Dr Arishwarya*

Signature : *(Signature)*

Date & Time : *9/4/26*

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 0 M 28 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
9/4/26 10:20 AM		Secure by <u>WS</u> sev
	On HFNC @ 6L/min. - No brady / tachycardia	→ Jc HFNC to shift down
	NSG - (N)	→ Continue KMC & NNS
		→ Blood gas ^{once} twice weekly
		Def P noted at 9:45 AM 10:26 AM
9/4/26 1 PM	<u>Afternoon Notes</u>	
	on HFNC 5L/min	<u>Plan</u>
	Prone, no distress	① cont HFNC 5L/min
	Active	② TV = 150 ml/kg/day
	HR - 164/min	18ml q2h + 0.5gm
	SpO ₂ - 100%	fortification
	RR - 34/min	③ was once weekly
	Tolerably full feeds	④ cont KMC, OMS
	PA - soft, non distended	NNS
	No brady / tachycardia	⑤ w/ t apnea / desat
	KMC ~ thus done	Noted by Barbar 9/4/26 @ 1:00 PM



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
9/4/26	<u>cls/b ANVSV</u>	
		<p><u>Adv</u></p> <ul style="list-style-type: none"> ① HFNC @ 5Ltr ② PRN ③ NNS
10/4/26 2:00 PM	<u>Night Rounds</u>	
	<p>vitality stable on HFNC @ 5Ltr SpO₂ - 94% HR - 56/min RR - 160/min comfortable on prone tolerably feeds PA - soft</p>	<p><u>Plan</u></p> <ul style="list-style-type: none"> ① cont HFNC @ 5Ltr ② alt distal ③ cont feeds as planned
		<p><u>Mohd Saif</u> <u>Neon</u> 10/4/26 ② 8 PM</p>

Dr. VIJAYANAND JAMALPURI
 Reg. No. 40526

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day of Life : 30 PMA: 33 + 1
Preterm Gestation : 28 + 6 Corrected Gestational Age:

Problems :

S.No.	Current	Past Problems
1.	Very PT / VLBW / RDS	
2.	evolving CLD	
3.	MBD	
4.		
5.		
6.		

OVERVIEW

Today's Weight : 1.217 (1.15 15gm)

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂..... Oxygen : L/min

Last CXR : Spo₂.....

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours: br -> HFNC SL
comfortable in prone
NO distress

KMC ✓

RESPIRATORY SYSTEM

Plan of Care :

HR - 160/min
SpO₂ - 98%
RR - 42/min

CARDIO-VASCULAR SYSTEM

Neurological Examination :

..... Sedation.....

Last Neurosonogram : Any Seizures.....

CNS

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: 5ml/h ml/kg/hr Stools: +++

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: 18ml Frequency: Q24

TPN: Yes No - If yes, details: Calories:

Abdominal Examination: soft, non distended

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	Sl.No.	Drugs	Days
		1.		<u>oxycodone D</u> <u>vit D3</u> <u>syp caffeine</u> <u>oxycodone XT</u> <u>3-1-NaCl</u> <u>vit K1</u>
2.				
3.				

Plan of Treatment :

① cont HT/NC @l/min
 (R) to taper

② TV = 180ml/kg/day → 18ml Q24 on feeds

③ Cas once weekly

④ cont KMC
 OMS
 NNS

⑤ w/e apnea/desat

Doctor's Name (Handover given) : Dr. Arduwaga

Signature : [Signature]

Date & Time: 10/4/20

Doctor's Name (Handover taken) : [Signature]

Signature : [Signature]

Date & Time: 10/4/20

EAH-00650784
 Baby Of P SANDHYA RANI
 17-03-2026
 Dr. VIJAYANAND JAMALPURI

IPS-00

OYOM 29 C

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		Seen by Dr. VS
10/4/26		→ Continue HFAC → 50ml
10:01 AM		→ Blood gas weekly once
		→ KMC, NMS
10/4/26	Afternoon Feeds	Noted By R. S. Prasad 10/4/26 10:01 AM
1:30 PM		Plan
	Continue HFAC	→ Continue HFAC → 50ml
	Intermittent tachypnea	→ Gas - weekly once
	FR soft, tolerating feeds	→ KMC, NMS
	HR - 148/min	→ GA 135 OD
	RR - 58/min	→ monitor vital
	SpO2 98%	# (FRAC)
10/4/26		Seen by Dr. VS
3:05 PM		→ Continue HFAC → 50ml

VIJAYANAND JAMALPURI
 Reg. No: 60526

Noted
 10/4/26

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI (M)
 11-03-2026 0 Y 0 M 30 D
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
10/4/26 - 11:30pm	<u>Night Round</u>	
	Baby is on HFC - 5lit No Brady / decat. intermittent tachypnea RR - 68/min SpO ₂ - 99% P/A - soft	ds/B Present <u>Man.</u>
		1) Continue HFC - 5lit Target SpO ₂ - 90-95%.
		2) IV - 10cc/kg/day 04 feeds
		3) prone nursing
		4) Monitor vitals <u>Poopy</u>
		Noted by Nandini 10/4/26 11:30pm.

BAH-00650784
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 0 M 30 D (M)
 Dr. VIJAYANAND JAMALPURI

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STATEMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 31 PMA: 33+2

Term Preterm Gestation : 28+6. Corrected Gestational Age:

OVERVIEW	Problems :	
	S.No.	Current
1.	VPT/VLBW/RDS	
2.	evolving CLD.	
3.	MBD.	
4.		
5.		
6.		

Today's Weight : 1.228kg (17 gm ↑)

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....FiO₂.....Oxygen :L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours... on HFNC - 5lit
 Intermittent tachypnea (+)
 No desat/beady.

CARDIO VASCULAR SYSTEM

Plan of Care :
 HR - 170/min U/O
 RR - 41/min CRBS
 SpO₂ - 93%
 BP - 63/39(43)

CNS

Neurological Examination :

Sedation : No

Last Neurosonogram : (W) Any Seizures : No

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input : / (+/-) Output : ml/k/d Urine Output : ml/kg/hr Stools :

IV Fluids - Type of IVF : @ ml / hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN : Yes No - If yes, details : Calories:

Abdominal Examination: *TV - 180 cc/kg/day*

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

..... *PIA - soft*

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	Sl.No.	Drugs	Days
		1.		
2.				
3.				

Glycerine fortification

Plan of Treatment :

- Continue HFNC - 5lit
Target SpO2 90-95%
- TV - 180 cc/kg/day → 18 ml 2nd hely. O4 fud + fortification
- Gas - once weekly
- Continue KMC, OMS, NNS
- C/P apnea, brady, desat
- ARBS - OD
- Monitor vitals
- Bone nursing

Doctor's Name (Handover given) : *Propitix*

Signature : *[Signature]*

Date & Time : *11/4/26, 8am*

Doctor's Name (Handover taken) : *[Signature]*

Signature : *[Signature]*

Date & Time : *11/4/26*

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 0 M 30 D (M)
 Dr. VIJAYANAND JAMALPURI

10



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
11/4/26 10:05 am		<p>Seen by Dr. VJ</p> <p>↓ HFNC to 4L/min</p> <p>✓ KMC, NNS, OMS</p> <p>✓ TV - 180cc/kg/day</p> <p>✓ NP₂ - Monitor Blood gas</p>
		<p>Pupjili</p> <p>Noted by K-Supriya</p> <p>11/4/26</p> <p>10:05 am</p>
11/4/26 1:05 pm	<p>Afternoon</p> <p>- on HFNC - 4L/min</p> <p>- No RD, apnea brady</p> <p>- tolerated KMC</p> <p>- Currently</p> <ul style="list-style-type: none"> • HR = 170 • RR = 50/min • SpO₂ = 93/min 	<p>Adv</p> <p>- continue HFNC @ 4L/min</p> <p>✓ TV - 180cc/kg/day</p> <p>✓ 18ml shower + fastidious</p> <p>✓ 3x kcal</p> <p>- Gas free Monitor NP₂</p> <p>✓ continue KMC, OMS NNS</p> <p>✓ W/F upnea, brads desat → Infocus</p>

Dr. VIJAYANAND JAMALPURI
 Reg. No. 40526

Noted by K-Supriya
 11/4/26 1:05 pm
 Rupjili

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 0 M 30 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
11/04/26		Seen by Dr VJ
3:45 pm		- HFNC - 4L/min
		- NP ₂ Gas } Monday
		Purijax
		stated by Sujay 11/4/26 3:45 pm
		seen by Dr. Atish
11/4/26		
11:50 pm		
		plan
		- continue HFNC - 4L/min
	- Tachycardia	- Don't wean HFNC
		- If persistent tachycardia present
		NP ₂ Gas } T/M morning
		↑ set temp to 36.7°C
		- put clay wrap

12/4/26

DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 22 PMA: 33+3

Term Preterm Gestation : 28+6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	VPT/UGW/ RDS	
2.	Evolving CLD	
3.	MBD.	
4.		
5.		
6.		

OVERVIEW

Today's Weight : 1.254 (269m weight gain)

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂ 21% Oxygen : 4 L/min

Last CXR : SpO₂.....

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours.....

Intermittent Tachycardia @ (170-175)
 No Desaturation/Bradycardial apnea.

RESPIRATORY SYSTEM

Plan of Care :

SpO₂ - 99%
 RR - 17/m
 RA - 64ml
 BP - 67/54 (45)

CARDIO VASCULAR SYSTEM

Neurological Examination :

..... Sedation..... NO

Last Neurosonogram : Any Seizures..... NO

CNS

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: 26 gm Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: 2.9 ml/kg/hr Stools: Passed (6)

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: 18 ml Frequency: 2 hourly

TPN: Yes No - If yes, details: TV - 18 cc/kg/day Calories:

Abdominal Examination: soft no distension

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	SI.No.	Drugs	Days
		1.		
2.				
3.				

Handwritten notes in table:
 1. Ossopam, Vitamin, Gp. Carbine, Ooper XT, 3f. Nail
 2. Glycose fortification

Plan of Treatment :

1. Continue BFNC - 44/mo
2. TV - 180 cc/kg/day → 19ml @ 2 hourly on feeds + fortification
3. CRBS - DD
4. Gas ~~over~~ ~~weekey~~ and NP₂ - Tomorrow plan
5. Kone. one NNS Continue
6. ~~NP₂~~ 16 persistent Tallycaudra - ^{send} NP₂ Gas

Doctor's Name (Handover given) : N. Prathiba

Signature : [Signature]

Date & Time: 12/4/26

Doctor's Name (Handover taken) : Rupanjali

Signature : [Signature]

Date & Time: 12/4/26
8:40am

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 0 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
13/4/26 10:10 am		4/3 Dr. VJ
		1) Continue HFNC
		2) Blood transfusion as planned
		3) Weekly review.
		4) IV line.
		5) Hold supplements & antibiotics
		<p style="text-align: right;">(Dr. V. Perumal) Dr. VIJAYANAND JAMALPURI Reg No: 40526</p>
	<p style="text-align: center;"><u>Afternoon rounds.</u></p>	
13/4/26 2:30 pm	<p style="text-align: center;">Baby on HFNC</p>	<p style="text-align: center;">Plus</p>
	<p>NO Desat (Bradycardia / Apnea)</p>	<p>- Nps before lung post RBC transfusion for exam.</p>
	<p>SpO2 - 98%</p>	<p>- Blood transfusion as planned</p>
	<p>HR - 168/min</p>	<p>- has - to be done 2 hours post transfusion.</p>
	<p>RR - 27/min</p>	<p>- to normal.</p>
	<p>NA soft, no distension</p>	<p>plans of feeds - 2 half feeds full feeds.</p>
	<p>Edema @ U</p>	<p>- Monitor vitals.</p>

Dr. V. Perumal
 13/4/26


BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 0 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
13/04/26		plan
1515		
1hr	No Bcdns/feeds	① HFNC 4L/min
		② Contine
		Blood Test
		③ Feeds - as per
		Transfem protocol
		④ No. Supplements/Feeds
		to be given
		<p>Dr. VIJAYANAND JAMALPURI Reg. No. 40526</p>
		<p>Noted by poornima Blake</p>
13/4/26	Night 2 am	9/13 Dr. Nilesh
10pm	Daily exam	15
	L RBC hemoglobin - unremarkable.	
	RBC - 82 msh.	Continue HFNC - 4L
	Gas - 7-14 / 33-37 / 23-5 / 7-2 / 31.	Dose increase
	NA - 33-37 no distension	<p>3) give 2 half feeds (9ml) 1 lb normal. 15ml feeds @ 2 hourly.</p>
		4) Conj. laxix stat dose.
		5) TV - 150 c/hr/day - 100-110 - p
		<p>Noted by Vishnuvardhan</p>
		<p>Dr. Subramanyam (P.T.O)</p>

BAH-00650784 IP5-00171911
Baby Of P SANDHYA RANI
11-03-2026 0 Y 1 M 0 D (M)
Dr. VIJAYANAND JAMALPURI


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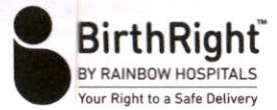


PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 0 D (M)
 Dr. VIJAYANAND JAMALPURI

(2)



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
13/4/26 10 am	Nutrition calculation	wt - 1.27 kg
	RU - 170 cal/day	- 215 ml
	Cal prot	catz per Fe. - vit-D
EBM -	1M4	2.36
		25 32.2 0.43 -
67/1.1/35		
15/0.2/-		
for 0.5g x 12		
3.39/0.27/8.99	46.6	3.24
1.36/0.09/4		71.8 16.3 1 48.
Adolphs (from 2ml)	-	- 31 - -
osopam-D (T=6ml) (13/5/200)	-	- 150 66 - 240
onferxt (T=0.25 ml)	-	- - 2.5 -
vit-D3 (2ml)	-	- - - - 800
GMV	190.6	5.6 296.8 145.5 3.93 1089.
pecky	150	4.4 233.7 114.5 3.09 856.6.
		catz per 2:1
		entire

(N. Beatusam) (P.T.O)

BAH-00650784
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 0 D
 Dr. VIJAYANAND JAMALPURI (M)



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 34 PMA: 33+5

Term Preterm Gestation : 28th : Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	VPT / VLBW / ROS	
2.	Evolving ckd /	
3.	metabolic bone	
4.	disease	
5.	Post CRBC	
6.		

OVERVIEW

Today's Weight : 1.252 ↓ 18 gm

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂ 21% Oxygen : 4 L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours: Inspiratory - Tachypnea @
NO Desaturation / Brady / Apnea
Edema @ Lower limbs.

RESPIRATORY SYSTEM

Plan of Care :

RR - 70/min
SpO₂ - 98%
HR - 153
BP - 57/31 (40)

CARDIO VASCULAR SYSTEM

Neurological Examination :

Sedation: No

Last Neurosonogram : Any Seizures: No

CNS

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input : / (+/-) Output : ml/k/d Urine Output : 3.5 ml/kg/hr Stools : (3)

IV Fluids - Type of IVF : @ ml / hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN : Yes No - If yes, details : Calories:

Abdominal Examination:
 No distension

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

Sl.No.	Drugs	Days
1.		
2.		
3.		

Syp - Cabt eine colmle
 Glycetre suppository.
 Rubing - Diy

Plan of Treatment :

Hfnc - 4l/mr continue -

1. IV - 160 (clcs) day → 17ml @ 24 hours on feeds
2. Chest X-ray now.
3. Hold supplements, fortification.
4. Dehydration @ 6th hours.
5. URBSOD

Doctor's Name (Handover given) : N. Prakash
 Signature : N.P.R.
 Date & Time : 14/4/26

Doctor's Name (Handover taken) : Dr. Ashwarya
 Signature : [Signature]
 Date & Time : 14/4/26

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 0 D (M)
 Dr. VIJAYANAND JAMALPURI

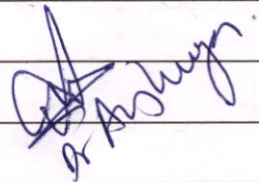



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
14/4/26 7:45 am	Intermittent tachypnea Retractions SpO2 - 94% HR - 156/min RR - 62/min	USG 1. Continue HFNC 6l/min 2. IV - 160 cc/kg/day 3. Chest X-Ray (As per table)
14/4/26 10 AM	seen by Dr. Vijayanand Plan VPT/VUBW/RDS evolving CLD MBS Anemia - post UBS. Dr. Anshu	① cont HFNC 6l/min ② If worsening tachypnea/distress, to consider CPAP ③ KMC OMS cont NNS ④ TV = 160 ml/kg/day 17ml 6/24 on feeds ⑤ Remove ① cannula ⑥ Fortification from 4pm ⑦ supplements from now

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
14/4/26 3PM	seen by Dr vijayanand.	Plan
		① cont HFNC 6l/min
		② fortification from 4m
		③ cont kcal
		ONS
		NNS
		
14/4/26 4PM	Afternoon Rounds	Plan
	on HFNC 6l/min	① cont HFNC 6l/min
	NO tachypnea/desat	② TV = 160ml/kg/day
	HR - 171/min	15ml @ 2H. 6C feeds
	SpO2 - 99.1	③ kcal
	RR - 58/min	ONS cont
	tolerating full feeds	NNS
	PA soft	④ fortification from 4m
	kcal ongoing	⑤ WBS OD
	Supplements restarted	⑥ 2/0 @ 6H
		

BAH-00550784 IP5-00171911
 Baby O P SANDHYA RANI
 11-03-2026 0 Y 1 M 0 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
14/4/26 - 9pm	Night Round	
	Baby is on HFNC - 6lit No heady / desat intermittent tachypnea.	
/	Vitals:	
	HR - 166/min.	Plan
	RR - 69/min	
	SpO ₂ - 100%	1) Continue HFNC 6lit
	BP - 80/54 (62)	Target SpO ₂ 90-95%
	P/A - soft, non distended.	2) TR - 160cc/kg/day
		17ml/2nd hely
		Full O ₂ feeds
		3) Continue PNC, NNS,
		ONS
		4) Fortification from
		tomorrow.
		5) Gas - twice weekly
		LBS - OD.
		6) I/O charting B to hely
		7) Monitor for vitals
		Populis

BAH-00650764 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 2 D (M)
 Dr. VIJAYANAND JAMALPURI



Handwritten initials: R

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 3 D (M)
 Dr. VIJAYANAND JAMALPURI



15/4/26



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 35 PMA: 33+6

Term Preterm Gestation : 28th Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	VPT/ELBW/ RDS	
2.	RDS - MV -> CPAP - HFNC	
3.	Metabolic bone disease	
4.		
5.		
6.		

Today's Weight : 1.220 (↓32g)

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV INO PPM

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....FiO₂.....Oxygen :L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours..... on HFNC - Glib

Intermittent tachypnea
Intermittent tachycardia

Plan of Care :
HR - 160/min
RR - 60/min
SpO₂ - 97%
BP - 55/48(51)

Neurological Examination :

..... Sedation.....

Last Neurosonogram : Any Seizures.....

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: ml/kg/hr Stools:

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination: **TV - 160cc/kg/day**

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

..... **PIA - soft**

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	Sl.No.	Drugs	Days
		1.		
		2.		
		3.		

Syp. Caffeine
Glycaine. Tubing Dis

Plan of Treatment :

- Continue HFNC - 6lit
Target SpO₂ 90-95%.
- TV - 160cc/kg/day => 17ml/2nd hely.
Full O₂ feed.
- Continue KMC, OMS, NWS
- Fortification from today.
- RBS - OD
Gas - twice weekly.
- D/o charting & tubing
- Monitor vitals

Doctor's Name (Handover given) : **Poojitha**

Signature : **[Signature]**


Date & Time: **15/1/26 8am**

Doctor's Name (Handover taken) : **A. Ashwini**

Signature : **[Signature]**

Date & Time: **8/1/26**

IP5-00171911
 SANDHYA RANI
 0 Y 1 M 2 D (M)
 Dr. VIJAYANAND JAMALPURI



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
15/4/26 9:30 AM		Seen by Dr. VJ
	Tubing - 244	<ul style="list-style-type: none"> Continue 6L/min HFNC Blood gas - once weekly
		<ul style="list-style-type: none"> Remove peripheral line
		<ul style="list-style-type: none"> TU - 170 cc/kg/day - 18ml - 2 hourly + fortification full O4.
		Rupjati
		Adu
15/4/26 2:00 PM	Baby on KMC Current vitals HR = 160 SPO ₂ = 96% RR = 45 breaths/min Temp - periphery to warm	HFNC - 6L/min - to continue TU - 170 cc/kg/day 18ml - 2 hourly + fortification full O4 feeds
	On HFNC - 6L/min Mild RD, SER, TER (+) (+)	Continue KMC OMS NNS Monitor vitals
		Rupjati

Dr. VIJAYANAND JAMALPURI
 Reg. No. 40526

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 2 D (M)
 Dr. VIJAYANAND JAMALPURI



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
<p>15/4/26 4:30pm</p>		<p>Seen by Dr Vijayanand</p>
		<p>Plan: - continue HFNC - 6lit - continue KMC; - Noted Big Megha 15/4/26</p>
<p>15/4/26 11:50pm</p>	<p>Night rounds</p>	<p>Seen by Dr. Sarab</p>
	<p>- on HFNC - 6lit/min SpO₂ - 99% PR - 142/min RR - 42/min - NO Bradycardia - NO desaturation,</p>	<p>Plan: - Continue HFNC - 6lit/min - prone weaning. - Gsg weekly once. - continue bulboq feeds. ↓ 18ml 2nd hly feeds</p>

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
<p>20/4/26 9:15 AM</p>	<p>Seen by Dr. Vijayanand</p>	<p>① cont HFNC 4L/min ② cont KMC, OMS. ③ weekly once gas GRBS alt day ④ TV = 180ml/kg/day 19ml q2H + 0.5gm fortification + 3% NaCl. ⑤ trace NP₂ ⑥ weekly review</p>
<p>20/4/26 12:00M</p>	<p>Afternoon</p> <p>- Baby on HFNC - 4L/min - on KMC - Periphery warm - NO deat, brady - HR - 166/min. SPO₂ = 91% RR = 30/min</p>	<p>Adv</p> <p>① cont HFNC - 4L/min ② cont TV - 180cc/kg/day 19ml - 2hourly. + 0.5mg fortification + 3% nacl. - GRBS - alt day - Gas - once weekly + R/V to ↑ Orefu - KT</p>

Dr. Ananya

Noted by
 mallekavani
 @ 10 AM

Dr. VIJAYANAND JAMALPURI
 Reg. No. 40526

Noted by
 mallekavani
 @ 1 PM
 20/4/26

Purita



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	<u>Nutrition</u>	
	- 19 ml + 2 hours	176 19 ml
	- MMF 6 sachet	228
	Add pher 1ml 3/mr	
	Orapen - x 7 0.3ml - 3ms	
	vitamin - 1ml - 800 IU	
	Ossapan = 1.5ml	
	N	Cal protein Ca ²⁺ PO ₄ Fe vit
	EBM	
	57/101/35/15/0.2/-	153 2.5 80 34.2 0.5
	MMF	
	3.29/0.27/5.99/1.36/0.09/-	23.0 1.62 36 8.16 0.5
	Vit - D - 8	800
	Ossapan - P	150 66 240
	Add pher	31
	Orapen	30 3m
		176 4.12 2.66 139.36
		108.9 4 1040
	Per ml	138 3.22 208.4 84.81 3.13 815
		109 8.4.3
		1.9:1

PROGRESS NOTES AND DOCTOR'S ORDER

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Date & Time	Progress Notes	Doctor's Order
20/4/26 2PM		Seen by <u>DEVJ Plan</u>
		Continue HFNC - 3 l/min
		Continue on feed
		Noted by manojkumar (Paw) @ 4PM 20/4/26
20/4/26	<u>Night</u>	<u>Plan</u>
	On HFNC - 4L/min @ 21%	Continue HFNC - 4L/min TV - 180 cc / kg / day 19 ml - 2 hourly + fortification + 3rd feed
	Tachypnea SER ⊕ FER ⊕	Grass - alt day Gas weekly once
	HR - 159/min RR = 65/min SpO ₂ = 93%	⊗ Prone position w/ secretions & gentle oro-nasal clearance
	Feeds - Tolerated vitals trends - stable Tolerate d KMC	Noted by Megha Roojal.

Dr. VIJAYANAND JAMALPURI
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 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 8 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
20/4/26 <u>11:40 am</u>		<u>cls/B-1 penic</u> → continue HBC with → continue o/a feeds # (fanz) Notter Neegle B 21/4/26



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : (41) PMA: 34+5

Term Preterm Gestation : 28+6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	EPT / ELBW	RDS
2.	Evolving CLD	
3.	Metabolic bone disease	
4.		
5.		
6.		

Today's Weight : ✓ ~~1.481~~ → 1.372 (96 gm wt gain)

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂..... Oxygen : L/min

Last CXR : Spo₂.....

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours: ONI HFNC - 4L/min

Intermittent tachypnea, mostly on Supine
Better tolerated in prone
No brady, desat

CARDIO VASCULAR SYSTEM

Plan of Care :

- HR = 171/min
- SpO₂ = 92%
- RR = 52/min
- BP = ~~81/23(41)~~
73/32(46)

Bipedal oedema

CNS

Neurological Examination : No Tone, - appropriate
cry - good,
moving all 4 limbs Sedation NO

Last Neurosonogram : (N) Any Seizures NO

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 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 8 D (M)
 Dr. VIJAYANAND JAMALPURI



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
21/04/26		
2:35 PM	On HFNC	
	4L/min	
	No brady/descts	
	KMC - being given	
21/4/26	<u>Night sounds</u>	<u>Play</u>
9 PM	On HFNC - 4L/min	Continue HFNC - 4L/min
	No Desaturation/Brady	N - 180 ml/kg/day.
	SpO ₂ - 97%	AM @ 2H +
	RR - 162/min	prophylaxis.
	RR - 44/min	+ 3-1. Nacl
	BP - 61/31 (43).	KMC, oms, NNS continue.
		was once weekly.
		GRBS alternate day
		Noted
		By
		Megha
		22/4/26

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 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 11 D (M)
 Dr. VIJAYANAND JAMALPURI



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 42 PMA: 34+6

Term Preterm Gestation : 28+6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	EPT / ELBW	RDS.
2.	Evolving CLD.	
3.	Metabolic bone disease	
4.		
5.		
6.		

Today's Weight : ~~0.957 kg~~ (~~1.19 gm~~) 1.341 kg (+31 gm)

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....FiO₂.....Oxygen :L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG : on HFNC - 4lt/min

Change over the Last 24 Hours..... FiO₂ = 28%

Intermittent tachypnea (P)

NO brady, desat

Plan of Care : HR = 168/min V/O = 3ml/kg/hr
 RR = 80/min S/O = 5 times
 SPO₂ = 94% on HFNC
 BP = 61/36 (45) mmHg.

Neurological Examination :

..... Sedation.....

Last Neurosonogram : Any Seizures.....

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: ml/kg/hr Stools:

IV Fluids - Type of IVF: @ ml / hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination:

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION

Antibiotic	Sl.No.	Drugs	Days
	1.		3% Nzel (7mg)
	2.		MMP
	3.		Syp - Ossopan - D
			Syp - Ceftazidime
			vit D3.
			Rofovor - XT

Plan of Treatment :

- Continue HRRc 4lt/min
- Target SpO2 90-95%.
- TV = 180ml/kg/day - 19ml/2ndhly + 0.5gm fortification + 3% Nzel.
- Continue KMC, NNS, OMS.
- GABS - OD
- Gas - weekly once
- W/P distress, R1 retractions.

Doctor's Name (Handover given) : Dr. RAMYA

Signature : [Signature]

Date & Time : 22/4/26, 8am.

Doctor's Name (Handover taken) : [Signature]

Signature : [Signature]

Date & Time : 22/4/26

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 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 6 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
22/4/26		Seen by <u>Dr. VS</u>
@ 9am	VPT/EIBW	
	CLD	1) Continue HFNC - 4L/min
		2) Cont. KM C
		NNS
		OMS
		3) GRBS - OD
		Gas - weekly
		4) 170ml / day
		Noted by <u>Sreha</u>
		Adv
		plan to continue
		HFNC - 4L/min
	1) HFNC - 4L/min	
	2) Minimal tachypnea	≤ TV - 170 cc/kg/day
	3) KMC	- 19ml - 2 hourly
	4) HR = 170/min	+ fortification
	RR = 58/min.	- 8 Continue KMC
	SpO ₂ = 92.1.	NNS
	Vital trends - (N)	OMS
		GRBS - OD
		MAS - weekly once

Sreha

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
<u>22/4/26</u> 5:30pm		Seen by Mrs
		1) Continue HFNC - 4l/min 2) Continue KMC NNS OMS noted by malleshwari @ 6PM dep Dehanna
<u>22/4/26</u> @ 11:30pm	<u>Night Rounds</u>	<u>Plan</u>
	1) Baby on HFNC-4l/min FiO ₂ - 23% Intermittent Tachypnea (+) mild JCR (+) No desaturation No Bradycardia	1) Cont. HFNC-4l/min Target SpO ₂ 90-95% 2) T ₀ = 170mb/kg/day 19mb/2ndhrly + fortification
	vitals: HR = 158/min RR = 34/min SpO ₂ = 98% P/A - Soft No distension	3) Cont - KMC NNS OMS 4) Gas - weekly once GRBS - OD 5) No charting 6thhrly 6) w/f - distress, Brady, desat

noted by Malleshwari 22/4/26

Sneha (P.T.O)



23/4/26

DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 42 PMA: 35-34w6

Term Preterm Gestation : 28+6 Corrected Gestational Age: 1

OVERVIEW	Problems :	
	S.No.	Current
1.	EPT / ELBW	RDS
2.	Evolving CLD	
3.	Metabolic bone disease	
4.		
5.		
6.		

Today's Weight : 21.451 (3 110 gm)

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fig.....Oxygen :L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours: HFNE - 4L/min
RD - Much settled

CARDIO VASCULAR SYSTEM

Plan of Care : HR = 160
SPO₂ = 97
BP = 59/31 (40)

B/h Pedal Oedema -

CNS

Neurological Examination : (N) Sedation : NO

Last Neurosonogram : Any Seizures : (NO)

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input : / (+/-) Output : ml/k/d Urine Output : ml/kg/hr Stools :

IV Fluids - Type of IVF : @ ml / hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN : Yes No - If yes, details : Calories:

Abdominal Examination: $U/O = 2-6 \text{ cc/kg/hr}$
+ 162 ml

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....
No aspirate.
.....
Stool-passed.

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	Sl.No.	Drugs	Days
		1.		
		2.		
		3.		

3% NaCl. clojel x 7
fortification Addphos
Syp. ossopan-D
caffeine citrate.
vitamin D3

Plan of Treatment :

Continue HFNC - 2 l/min → R/U to ↓ HFNC

TU - 170 cc/kg/day - 20ml / 2nd hour
EBM + fortification
+ 3% NaCl

GRBS - OD

GRAS once - weekly

Encore KMC
OMS
NNS

Recheck weight.

Doctor's Name (Handover given) : Rupanjali

Signature : Rupanjali

Date & Time: 23/04/26

Doctor's Name (Handover taken) : Sneha

Signature : Sneha

Date & Time: 23/04/26

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 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 6 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

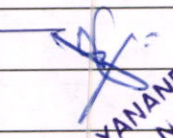
Date & Time	Progress Notes	Doctor's Order
<u>23/4/26</u>		<u>seen by Dr. VJ</u>
<u>10 AM</u>		→ continue Hboc → vit K10
		→ KMC, OMC
		→ furosemide (oral) 1 mg 0.5 mg/kg
		⊗ (KAI/2)
		Noted by ridge 081143 23/4/26
		@ 10 am
<u>23/4/26</u>	<u>Afternoon today</u>	<u>plan</u>
<u>1 PM</u>	on Hboc → vit K10 occasional tachypnea	→ continue Hboc → vit K10
	tolerably feeds	→ OMC, OMS
	HR 74/min RR 58/min SpO2 98%	→ continue DR feeds
		→ vit K10 & D.
		→ Gas weakly once
		⊗ (KAI/2)

Dr. VIJAYANAND JAMALPURI
 Reg. No: 4052



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
23/4/26 3:20 PM		<u>ckls DVT</u>
		→ bedtime Hfsc → 4/4 ✓ → Kmc ✓
		✓ → w/f urine output (FAC)
		noted by vidya 021743 23/4/26 @ 3:20pm
		 DR. VIJAYANAND JAMALPURI Reg. No: 40526
28/4/26 11:45 PM	<u>Night records</u> - on Hfsc - 4/4 then - Intermittent desaturation & self pick up SpO ₂ - 96% PR - 165/min RR - 47/min	<u>Plan:</u> - continue Hfsc - 4/4 then - TR - 170ml/kg/day ↓ full OR feeds
		noted by Bushra 23/4/26 11:45pm

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	Wt - 5.9 kg/kg	Gas once weekly
		Aub
		Noted by
		8/15/26
		93/4/26
		@ 11:45 pm

24/4/26

DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 43 PMA: 35 wks

Term Preterm Gestation : 28+6 wks Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	ExPT LEUSW	RDS
2.	Evolving CLD	
3.	Metabolic bone disease	
4.		
5.		
6.		

Today's Weight : 1462g (+11g)

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio.....Oxygen :L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours: on HFNC - 4lit
 No brady, intermittent desat with self pick up.

CARDIO VASCULAR SYSTEM

Plan of Care : HR - 168/min U/O - 3.8cc/kg/hr
 RR - 42/min Stools - passed
 SpO₂ - 99.1 CRBS - 100mg/dl
 BP - 64/40(27)

CNS

Neurological Examination :

Sedation : -

Last Neurosonogram : (N) Any Seizures : -

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: ml/kg/hr Stools:

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination:

TV - 170cc/kg/day

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

P/A - soft

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	Sl.No.	Drugs	Days
		1.		
2.				Onapan - D.
3.				Caffeine - vit D3

0.5g Addphos.

Plan of Treatment :

- Continue HRW - 4ml, Target SpO₂ 90-95%
- TV - 170cc/kg/day → 20ml/2nd hly + 0.5g fortification + 3% NaCl
- Blood gas - once weekly
CRBS - OD
- No chaiting 6th hly
- Monitor vitals

Doctor's Name (Handover given) : Roopali

Signature : [Signature]

Date & Time: 24/4/26 7am

Doctor's Name (Handover taken) : [Signature]

Signature : Roopali

Date & Time: 24/4/26

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Baby Of P SANDHYA RANI
11-03-2026 0 Y 1 M 11 D (M)
Dr. VIJAYANAND JAMALPURI



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
24/04/26 9:00am		Seen by Dr. VJ
		- Cont HFNC - 3L
		= KME, NNG, OMS
		FU = 165ml / ks / day
		20ml / 2 hourly
		feeds
		lurgical
		Noted by
		Vijay
		021143
		1244726
		@ 8:30am

Dr. VIJAYANAND JAMALPURI
Reg. No. 40526



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
24/04/26	<u>Afternoon</u>	<u>Adv</u>
12:00 pm	<ul style="list-style-type: none"> Baby on HFNC 3L/min 	<ul style="list-style-type: none"> Continue HFNC 3L/min
	<ul style="list-style-type: none"> No brady, desat Tolerating full OG feed 	<ul style="list-style-type: none"> TU - 165 cc/kg/dn 20ml + 0.5g 1 sachet paracetamol
	<ul style="list-style-type: none"> HR = 170 SpO₂ = 92% 	<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <ul style="list-style-type: none"> KMC OMS NNS </div>
		<ul style="list-style-type: none"> W/F apnea, brady, desat → infam. Rupaipal
		<p>Noted by nidga 021143 24/4/26 @ 12pm</p>
24/4/26	Seen by Dr. VS	
@ 3pm	Stable on 3L/min HFNC	
	KMC being Given	
		<u>Sneha</u>

BAH-00650784 IP5-00171911
Baby Of P SANDHYA RANI
11-03-2026 0 Y 1 M 11 D (M)
Dr. VIJAYANAND JAMALPURI



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order



17A

25/4/26



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 44 PMA: 35+1

Term Preterm Gestation: 28+6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	<u>WPT</u> <u>EXPT ELBW</u>	<u>RDS</u>
2.	<u>Evolving CLD</u>	
3.	<u>Metabolic bone</u>	
4.	<u>disease</u>	
5.		
6.		

Today's Weight : 1.510 ↑ (529gm)

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV INO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂..... Oxygen : L/min

Last CXR : Spo₂.....

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours.....
On HFNC support of 3L/min
Uneventful 24 hours, no brady, no desat
(*) Mild SCR, ICR

Plan of Care :

HR - 130/min
 RR - 62/min
 Temp - 36.5

Euglycaemic

Neurological Examination :
 (N) Sedation..... (N)

Last Neurosonogram : Any Seizures..... (N)

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain:..... Head Circumference:.....

Input : / (+/-) Output : ml/k/d Urine Output : ml/kg/hr Stools :

IV Fluids - Type of IVF : @ ml / hr

Feeding: EBM Formula Donor BM Volume:..... Frequency:.....

TPN : Yes No - If yes, details : Calories:.....

Abdominal Examination:.....

Feeds tolerated

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

P/A - Soft

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:.....

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION

Antibiotic	Sl.No.	Drugs	Days
	1.		
	2.		
	3.		

Tubing -10

Plan of Treatment :

- continue HFNC @ 2L/min R/V - ↓ by (1L/min to 2L/min)
- TV-165 cc/kg/day
- 20ml + 0.5g sachet fortification
- KMS, OMS, NNS (Aim for 8hr kcal)
- w/f apnea, brady
- GAS once weekly
- R/V for NP₂ on Monday.

Doctor's Name (Handover given) : *Rupanjali*

Signature : *Rupanjali*

Date & Time : *25/04/22*

Doctor's Name (Handover taken) : *N. Prathin*

Signature : *N.P.*

Date & Time : *25/4/22*

BAH-00650784 IP5-00171911
 Baby O P SANDHYA RANI (M)
 11-03-2026 0 Y 1 M 11 D
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
25/04/26 8:35 am		Seen by Dr. Vijayanand
	Tubing - 10 dm	<ul style="list-style-type: none"> ✓ continue 3L/min HFNC - KMC, OMS, NNS
		<ul style="list-style-type: none"> - NP₂ / Monday gas
	<p>Abdomen round.</p>	<p>Plan</p>
25/4/26 2:30 pm	<p>44 DOH 2876 → 2574.</p>	<p>1. Continue HFNC 3L/min</p>
	<p>on HFNC - 3L/min No Desat / Brady SpO₂ - 95% HR - 153/min RR - 59/min</p>	<p>2. TV - 165 cc/day → 21 ml + fortification.</p>
	<p>Joint stool / passed</p>	<p>3. Gas as planned</p>
	<p>PA - no distension</p>	<p>4. Continue EMC, OMS, NNS. 5. Wee only once gas 6. Monitor RR, HR, Temp, SpO₂</p>

DR. VIJAYANAND JAMALPURI
 Reg. No: 40526



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
25/2/26 9:00 AM	<u>Nutritional Equival</u>	mat wt: 1.51 kg
	TV \Rightarrow 165 cal/kg/day \rightarrow 250 ml.	
	<u>Cal prot cat² Pe⁻ Iron vit-D</u>	
- EBM 6/7/11/35 15/0.2/-	167.5 2.75	87.5 37.5 0.5 -
- fortification (0.5g x 12) 3.8g/0.27/5.9g 1.36/0.09/1	46.6 3.24	71.8 16.3 1 48
- obapain (6ml)	-	150 66 - 240
- onfort (0.5ml)	-	- 5 -
- Addphos (2ml)	-	- 31 -
- vit-D3 (800IU)	-	- - 800
	total 214.1 5.99	309.3 150.8 6.5 1098
	per kg 141.7 4	204.8 100 4.3 720.5
	cat ² : Pe ⁻ ratio: 2:1 2876 \rightarrow 35H	

W. Beathish

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 10 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
25/04/26 4:13 pm	<p>stable on 3L HFNC</p>	<p>1- Continue HFNC 3L/m².</p> <p>2. tabs as planned</p> <p>N. Dutta</p> <p>noted by Poojitha 25/4/26 @ 8am-8pm</p>
25/4/26 11 pm	<p><u>Night Landy</u></p> <p>on HFNC - 3L/m²</p> <p>No Desat.</p> <p>intermittent tachypnea</p> <p>SpO₂ - 98% HR - 159/m² RR - 77/m² BP - 60/33 (41)</p> <p>scr[⊕] mild.</p> <p>Plt - soft, no distension.</p> <p>no vom stool/pant.</p>	<p>3. tabs for <u>Seromya</u> as <u>plan</u></p> <p>1. Continue HFNC 3L/m²</p> <p>2. continue .06 feeds. 21 ml @ 2H + fortification</p> <p>N-165cc/kg/day</p> <p>3. tabs as planned.</p> <p>4. weebly aug[⊕]</p> <p>5. kmc. obs. cont[⊕]</p> <p>N. Dutta</p>

Patient Sticker



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order



B/o P. Sandhyarani

DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 45 PMA: 35+2
 Term Preterm Gestation : 28+6 Corrected Gestational Age:

OVERVIEW	Problems :	
	S.No.	Current
1.	VPT / EUBW	RDS
2.	Evolving CD / Metabolic	
3.	bone disease	
4.		
5.		
6.		

Today's Weight : 1.532 ↑ 22gm

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂..... Oxygen : 3 L/min

Last CXR : Spo₂.....

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours.....

Intermittent Tachypnoea ⊕

CARDIO VASCULAR SYSTEM

Plan of Care :

SpO₂ - 97%
HR - 156/min
RR - 61/min

CNS

Neurological Examination :

Sedation..... Ne

Last Neurosonogram : Any Seizures..... No

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: 2-8 ml/kg/hr Stools: (6)

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination:
no distension or jkbt

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	Sl.No.	Drugs	Days	
		1.			
2.					
3.					<u>Tubexyl - D11.</u>

Plan of Treatment :

1. Continue HFNC 2L/min
2. TV - 165 cels/day - 21 ml @ 2H + fortification
3. NP2, gas - ononday
4. Kcon, oms, NNS as planned.
5. Bio charting continue

Doctor's Name (Handover given) : N. Pratiksh

Signature : N. Pratiksh

Date & Time : 26/04/26

Doctor's Name (Handover taken) : Y. Sreelaxa

Signature : Sreelaxa

Date & Time : 26/04/26 @ 9am

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2028 0 Y 1 M 14 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
26/4 @ 3:25 AM		seen by Dr. vijayand
		- ↓ HFNC - 2lit
		→ NP2 + } Monday blood gas
		Dr. Mather
		Dr. VIJAYANAND JAMALPURI Reg. No. 40526
26/4/26 @ 1 PM	Afternoon Rounds	Plan
	Baby on HFNC-2lit No Bradycardia No desaturation	1) Continue HFNC-2lit Target SpO ₂ 90-95%
	⊙ ongoing KMC	2) IV = 165ml/kg/day 21mg 2nd half + fortical
	Tolerating feeds well mild JCR ⊕	3) NP2 } Tomorrow Gas } (Monday)
	Vitals - HR = 154/min RR = 54/min SpO ₂ = 98%	4) KMC } ONS } as planned NNS }
	P/A - soft	5) No choling
		6) w/ apnea, brady, desat



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
26/4/26 @ 9:10pm	<u>Night Rounds</u>	<u>Plan</u>
	Baby on HFNC = 2l/min FIO ₂ - 21%	1) Continue HFNC - 2l/min Target SpO ₂ 90-95%
	No Bradycardia Intermittent desaturation	2) TV = 165ml/kg/day 2l/ml 2nd Bicy + fortification full O/G feeds
	with KMC requiring O ₂ upto 25%.	3) KMC ONS } to continue MNS }
	NO tachycardia	4) NP ₂ Blood gas } Tomorrow GRBS }
	Abdomen - Soft Tolerating feeds well	5) No chattering 6th h
	<u>Vitals</u> - HR = 161/min RR = 56/min SpO ₂ = 100% BP = 86/56 (u2)	6) w/f - Apnea, Brady, desaturation
	P/A - Soft	Sneha
		Noted by Sneha 27/4/26 @ 10pm

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 14 D (M)
 Dr. VIJAYANAND JAMALPURI



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 46 PMA: 35+3

Term Preterm Gestation : 28+6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	UPT + ELBW	
2.	Evaluating chd	
3.	Metabolic bone disease	
4.		
5.		
6.		

Today's Weight : 1.551 (199g)

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....FiO₂.....Oxygen :L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours: - on HFNC - 2L/min
NO brads, NO desat

CARDIO VASCULAR SYSTEM

Plan of Care :
 HR = 156/mi.
 RR = 48/mi
 SPO₂ = 92%

CNS

Neurological Examination : (N)

Sedation : (N)

Last Neurosonogram : (N) Any Seizures : (N)

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: ml/kg/hr Stools:

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination:

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

P/A - soft
tolerating feeds

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION

Antibiotic	Sl.No.	Drugs	Days
	1.		
	2.		
	3.		

Plan of Treatment :

- continue HFNC - 2l/m².
- IV - 165 cc / day → 2l ml - 2 hours
EBM + 3% Nacl + fortification
full O₂
- KMC - aim for 2 hours full O₂
- GRRBS - OD
- NP₂ / GRRBS } today
- Monitor vitals, weekly review
- w/f apnea brady basal

Doctor's Name (Handover given) : Shehe

Signature :

Date & Time: 27/09/20

Doctor's Name (Handover taken) : (Signature)

Signature : Rupjinh

Date & Time: 27/09/20



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
27/1/24 9:50 am		Seen by Dr. VJ Continue HFNC 2L/mo Trace NP2
	Tubing = 12 dm	- Cran eos. - Weekly review.
27/1/24	Purine Afternoon sounds DOL-96/8876 → 8573.	Plan
	ON HFNC - 2L/mo No Desaturational Breaths	+ continue HFNC 2L/mo + TV - 165 cm long → 21ml @ 24 EBM 31 new + fortification full of feeds.
	SpO2 - 98% HR - 160/mo RR - 56/mo P/A - no distension Urine stool passed.	+ GRBS-OD + monitor vitals. + aeg eos. + attach weekly review progress sheet to the file.
	Hb - 7.8 Tubing P/A	P. Pervez

Dr. VIJAYANAND JAMALPURI
 Reg. No: 40526

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
27/4/26 3PM	Seen by Dr. Vijayanand. Hb - 7.8	Plan ① cont HFNC ② w/f resp status ③ RW blood transfusion ④ RW to ↓ HFNC 2l/ml ④ nutrition calculation after securing Ca & PO4 needs
	Nutrition - TV = 252 ml EBM - Fortification = 0.5g / 12 sachet.	
	From EBM =	
	6.7/11/35/15/0.2/-	168.84
	MMF	23.34
	3.89/0.27/5.99/1.36/1.09	23.34
	Ossopan-D	150
	Vit-D3	66
	Add phar	31
	Onafu-X3	5mg
		240
		800 IU

Noted by Poojitna 27/4/26 @ 8am-8PM
 Dr. VIJAYANAND JAMALPURI Reg. No. 40026

192.18 | 4.39 | 2.74 | 142.66 | 6.04 | 1040
 122.90 | 2.85 | 176.75 | 91.96 | 3.89 | 670

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 18 D (M)
 Dr. VIJAYANAND JAMALPURI



G2



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
27/04/26 5:20 PM	<p>Cal = 123.90 / Ru kg Protein = 2.83 per kg Ca = 176.75 PO4 = 91.96 (Ratio = 1.92:1) Iron = 3.89 mm Vit-D3 = 670</p>	<p>Plan - R/V to ↑ Vit-D3 - R/V to ↑ iron dose - R/V to ↑ Noted by Rojitha 27/4/26 @ 8:30 PM Surgical</p>
27/4/26 9 PM	<p><u>Night rounds</u> DOH-46 / 28+6 → 35+3 on HFNC-2L No Desat / Brady Intermittent Tachypnoea ⊕ SpO2 - 97% HR - 156/min RR - 76/min milder ⊕ Tachypnoea ⊕ mld. PLA - to discussion.</p>	<p>Plan 1. Continue HFNC-2L 2. TV - 165 cc/kg/day 2ml @ 24 + EBM + 2ml. Oral fortification full on feeds 3. ... 4. RBS - 00 5. Monitor vitals 16 Tachypnea Persisting - RBC 603-</p>

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 16 D (M)
 Dr. VIJAYANAND JAMALPURI



G3



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/04/26 7am		<u>ready on wheels</u>
	On HFNC - 2L	1. Continue HFNC 2L
	Tallygen 100mg	2. LRBC - sos.
	HR - 153/min	1. 6 pensinj
	RR - 67/min	Tallygen
	S	Tallygen 100mg
		LRBC tomorrow.



28/04/26



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 47 PMA: 3574
 Term Preterm Gestation : 28 wk Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	VPT / ELBW / RD.	
2.	evolving CLD - 2.	
3.	metabolic bone disease	
4.		
5.		
6.		

Today's Weight : 1.572 (21 gm wt gain)

VENTILATORY SUPPORT : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂ 21 Oxygen : 2 L/min

Last CXR : Spo₂.....

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours.....

Intermittent Tachypnea ⊕, ~~bradycardia~~
No Dist / Brady
with SOB ⊕

Plan of Care :

Continue HFNC.

SpO₂ - 96%
RR - 170/min
RA - 34/100 Bp - 91/56 (65)

Neurological Examination : +

..... Sedation..... NO

Last Neurosonogram : Any Seizures..... NO

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: 21 gm ↑ Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: ml/kg/hr Stools: passed

IV Fluids - Type of IVF: @ ml / hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination: mild distension ⊕, soft

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

Sl.No.	Drugs	Days
1.		
2.		
3.		

Plan of Treatment :

- Continue HFNC-2L
- TV - 165 ccs/day (21 ml O₂H^{an} + EBM + 3/1. Nard)
- NPO as per transfusion policy.
- TV - 150 ccs/day ~~rest~~
- 20ml/kg LRBC Rest 10:1-150P
- Hold supplements, fortification.
- Do blood gas after 2 hours of transfusion
- If blood gas normal try 2 half feeds → 16 alternating well → full feeds.
- RBSVD 6. Secure 2 IV cannulas.

Doctor's Name (Handover given) : N. Prathiba

Signature : N. Prathiba

Date & Time : 28/11/26

Doctor's Name (Handover taken) : V. Sneha

Signature : Sneha

Date & Time : 28/11/2024

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 16 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/4/24 9:30am		seen by Dr. Peayoshan pln Blood transfusion as planned
		NPO as per transfusion protocol,
		Ces after 2 hours of transfusion.
		nutritional Assessment today + target 20 kcal, 100 pp
		Hold supplements, fortification
28/4/26 11:20am	Baby had desaturations with Bradycardia with Apnea. ↓ with Staring look No Spontaneous efforts ↓ Started PPV.	seen by Dr. Nalini Kant NIPPV → CPAP - to start → send cPP in sample → calcium 2ml Bq / → ex-crow cPP se calcium (magnesium) ✓

NO 629 Rg
Koushika
28/4
@ 9:30 AM

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	HR - T to \downarrow ≥ 100 /min	NPO
	SPO ₂ - 99% \downarrow	Start Dobutamine
	Cannula placed	Bicarb 5mEq/kg over 6h
	SaO ₂ = 88 \downarrow iCa ²⁺ = 0.6 \downarrow	Inj Caffeine (HOLD)
	Given Ca ²⁺ Corrector	Bicarb -
	2ml/kg IV	AmEq over 6h
	<i>ROSELYN</i> <i>20/04/27</i> <i>11:45pm</i>	
	Case seen by Dr Pratyush Sir	2D Echo
		① - mild RV dysfunction - mild PR - contractility mild impaired
		② NSU - (N) mild flacc
		③ See Ca ²⁺ Report Same sample albumin \downarrow - consider 8ml/kg/day for 48 hours if Ca ²⁺ < 7 (corrected) \downarrow then 9ml/kg/day



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		<p>④ Put a 2nd cannula ↓ ✓ CBP ✓ CRP ✓ Albumin</p>
		<p>NOW</p>
		<p>⑤ - If any further episode of staring of eye balls. & z like episode ↓ - Consider levipil loading</p>
		<p>⑥ CRBS - 5th & 6th hours</p>
		<p>- Repeat GAS</p>
		<p>⑦ Bicarb 2mEq over 2 hours + Repeat GAS at the end of 2 hrs then 2mEq over 4 hours</p>
		<p>e/o/w - Dr. PR</p>
	<p>S. Albumin - 1.9 S. Cal - 3.5 Mg = 1.4</p>	<p>⇒ Try Mg correction ⇒ Send PO4, ALP vit-D3, PTH Stop Adphas</p>

28/4/26

NOTED BY
 Koushik
 28/4
 @11:25 PM

Raojha



GP

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/4/26 @ 2pm	Afternoon Rounds	
	Baby had an acute event.	Plan
	↓ Apnea-Bradycardia, desaturation with unresponsiveness at 11:15 am requiring positive pressure ventilation	1) Continue NIV with Rams cannula Target SpO ₂ 90-95% ↓ w/f apnea, Brady
	↓ Metab. acidosis → 6.99 pH -25 BP Hypocalcemia - Severe	2) TV = 150 ml/kg/day ① 10% JSO-P + ② 8 ml/kg Ca gluconate ③ Sod. Bicarb correction ongoing
	↓ Started on Bicarbonate Correction Calcium Correction Ca. gluc. - ongoing	3) ongoing Dobutamine @ 6 µg/kg/min
	① cardiac : ② mild Impaired Contractility ③ mild RV dysfunction	4) Sod. Bicarbonate next 2 meq over 4 hrs
	Anemia	5) Gas at 2:30 pm
		6) No chattering 6th hrly

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	<p>Currently on NIV with Rams Cannula. PIP = 18, Peep - 6. RR - 40/min.</p>	<p>7) GRBS - 6th hly</p>
	<p>@ 2:05pm ↓ 2nd episode of Apnea, desaturation Tightening of all 4 limbs with bluish discoloration</p>	<p>8) ongoing MgSO4 correct discussed with Dr. Prathyush.</p>
	<p>↓ Given PPV for 25 sec. Spont. efforts present</p>	<p>9) Give 2mb/kg Ca gluconate</p>
	<p>↓ Vitals: HR = 149/min RR = 70/min SpO₂ = 100% BP = 76/52 (60)</p>	<p>10) Give loading dose of Levetiracetam</p>
	<p>Plt - soft plan of CRBC transfusion</p>	<p>11) @ DO - Blood gas</p>
		<p>12) Send for Sr. Calcium</p>
		<p>13) Ask for P_{ou}², ALP in the previous sample</p>
		<p>14) Send - PTH, VIT D</p>
		<p>Notary AE in 28/3 ed. 20pm Sneha</p>

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		Seen by Dr. Prathym
		1) TV = 180cc/kg/day all including
		2) Next prick Urea, Creat, Calcium, Phosphorus, Blood gas } at 10 pm.
		3) Keep NPO today
		4) Strict SpO2 monitoring
		5) T/m + NSG
		6) Cardiac evaluation today (T/m)
		7) Elective ventilation Keep in
		8) 12 lead ECG
		9) Pice line
		10) Keep NPO
		11) Nephro Opinion
		12) Endocrine opinion then Ini Levetiracetam, main (R.T.O)

Noted by
 Abin
 @ 28/04/26
 @ 2:50pm

3AH-00650784 IP5-00171911
 Baby O P SANDHYA RANI
 11-03-2026 0 Y 1 M 17 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

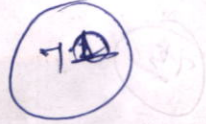
Date & Time	Progress Notes	Doctor's Order
28/4/26 5:47pm	<p>- Apneic episode, desaturation upto 60%.</p> <p>- Tachycardia ⊕</p> <p>- FiO₂ requirement up to 60%.</p> <p>NIPPV requirement high.</p>	<p>Seen by Dr. NK</p> <p>→ Calcium gluconate 1ml/kg IV dose over 2mi</p> <p>→ Lasix 0.5ml/kg stat</p> <p>→ Repeat Trace, mea. creatinine in same dose.</p> <p>→ FiO₂ requir</p>
28/4/26 @ 10pm	<p><u>Night Rounds</u></p>	
	<p>on Ventilator: SIMV mode. ↑ PIP - 14 → 18 (PEEP 5 → 6) Rate = 40 → 35 FiO₂ = 25% → 21% ↓ leak - 0% VT @ 5ml/kg</p> <p>⊙ vitals - HR = 131/min RR = 31/min SpO₂ = 99% BP = 65/41 (49)</p>	<p>1) Continue Current Ventilation PIP-18, PEEP-6 Rate = 35 FiO₂ = 25% Target SpO₂ 90-95%.</p> <p>2) TV = 180ml/kg/d ↓ 7.5% SpO₂-P Start feeds + 12ml/kg at 10pm ↓ Ca gluconate 2ml 2nd hourly + Calumax plus 6th hourly</p> <p>3) Repeat Ca⁺⁺, Poi² at 2AM</p>



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	P/A - soft	4) USG - abdomen - I/M
	U/O = 1.1ml/kg/hr last 6 hours	5) Strict I/O monitoring Inform if < 1ml/kg/hr
	GRBS - 296 mg/dl	6) Target GRBS (60-160 mg/dl)
	↓ Repeat Sugar after changing fluid	7) N8G - Tomorrow
		8) Cardiac Screening Tomorrow
		9) Trace PTH, VIT D
		10) monitor stat Ca ²⁺ PO ₂ 6th hourly
		11) Continue furosemide 1mg/kg/dose w/ vitals, Spasms Intra
		NO GARY KAROL (TRSC) 28/4/2026 PM



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/4/2026 @ 6:30pm	<p style="text-align: center;">Intubation Notes</p> <p style="text-align: center;"> </p>	
	<p>i/v/o Recurrent Tetratic Spells with airway compromise and desaturation with Bradycardia</p>	
	<p>Baby was electively Intubated under the cover of fentanyl with 3 size ET tube fixed at 7.5cm.</p>	
	<p>vitals Stable throughout B/L aentry present connected to mechanical ventilator SIMV mode</p>	
	<p>PIP - 15 → 16 PEEP - 5, Rate - 40 Ti = 0.35</p>	<p><u>Sneha</u></p>
28/4/2026	Picc line Notes	
@ 8:00pm		
	<p>Under strict aseptic precautions Baby IV cannula Secured and Picc line inserted through (Rt) Saphenous vein position confirmed on X-ray final fixation at 18cm</p>	
	<p>vitals Stable</p>	<p>1) Inj. fluconazole proph 2) start Hep NS 3) ATTT, to be followed</p> <p style="text-align: center;"><u>Sneha</u></p>



27/1/26



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 48 PMA: 35+5
 Term Preterm Gestation : 28+6 Corrected Gestational Age:

OVERVIEW	Problems :	
	S.No.	Current
1.	Very PT / ELBW / RD	
2.	Evolving CLD	
3.	Severe Hypocalcemia - Tetany	
4.	metabolic acidosis	
5.	Intubated - MV	
6.	Hyperphosphatemia	

Today's Weight:

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂..... Oxygen : L/min

Last CXR : SpO₂ :

ET Secretions : Clear Thick Yellow Last ABG: 1RBC given

Change over the Last 24 Hours: Baby on HFNC - 6L/min
Had episode tetanic spell
Started NIV > Intubated
SIMV PIP=15/18, PEEP 5/6, Fi=0.35
Rate - 35

CARDIO VASCULAR SYSTEM

Plan of Care :
 HR = 137/min ⊙ Calcium Correction Ongoing
 RR = 40/min ⊙ Calumax plus, lasix ongoing
 SpO₂ = 99% ⊙ Metabolic acidosis - NaHCO₃ Correction
 BP = 63/43 (50) ⊙ Hyperphosphatemia given - corrected
 ongoing Dobutamine, Hg correction given

CNS

Neurological Examination :

Sedation :

Last Neurosonogram : Normal Any Seizures :

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: ml/kg/hr Stools:

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination: $TU = 180\text{ml/kg/day}$ $U/O = 2.57\text{cc/kg/hr}$
GRBS -

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

$Ca^{2+} \rightarrow 2.5 \rightarrow 4.3 \rightarrow 4.3 \rightarrow 6$
 $PO_4^{2-} \rightarrow 7.3 \rightarrow 14.4 \rightarrow 9.9$

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	Sl.No.	Drugs	Days
		1.	Inj. fluconazole (P)	
	2.			
	3.			

⊙ Inj - Caffeine citrate (Pacc-D)
HMF (HOLD)
Calcimax plus (50mg/kg/day)
Lasix Inj - 6mg/kg/dose - BD
Dobutamine

Plan of Treatment:

- ⊙ continue current ventilation
Target SpO_2 90-95%
- 2) $TU = 180\text{ml/kg/day}$ \leftarrow 2ml ind hrly - OG feed
Rest $\rightarrow 7.5\%$ $180-P$
- 3) ongoing Dobutamine correct $1g \rightarrow 10\text{ml/kg}$ ca^{2+}
- 4) Today - USG abdomen for ~~calcium~~
calcium deposits.
- 5) Cardiac screening Today
- 6) GRBS - 8th hrly, Gas - BD
- 7) Ca^{2+} , $PO_4^{2-} \rightarrow$ 6th hrly
- 8) Trace - PTH, vitamin - D
- 9) Strict I/O monitoring
w/f - Tetanic spells

Doctor's Name (Handover given) : Y. Sreha
Signature : Sreha
Date & Time : 29/4/2026

Doctor's Name (Handover taken) : Y. Sreha
Signature : Sreha
Date & Time : 29/4/26

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 17 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
29/4/26 @ 7:09 AM		Discussed with seen by Dr. Prathyush
		<p>① ↑ feeds 3mls and 6th hourly</p> <p>② Send ⊙ Blood gas at 8am ⊙ Ca²⁺, Po₂⁻²</p> <p>③ Sr. electrolytes</p> <p>④ GRBS</p> <p style="text-align: right;">Sneha</p> <p>Noted by Sneha M 012824 29/04/26 @ 8 AM.</p>
29/4/26 9 AM	Seen by Dr. Prathyush	Plan:
	<p>ca - 3.5 → 4.3 → 6 → 6.6</p> <p>SpO₂ - 71.3 → 14.4 → 9.9 → 8.4</p> <p>ET scultrows ⊕</p>	<p>① chest xray now</p> <p>② Evening repeat ca 4-6 BPM PDy</p> <p>③ If increasing CRP/xray patch - consider Abx</p> <p>④ stop fentanyl</p> <p>⑤ Positioning - Supine</p> <p style="text-align: right;">they each it up (P.T.O)</p>



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		<ol style="list-style-type: none"> 6) ECG. to look for QT interval 7) ECG for calcium deposits. 8) cardiac screening 8) NSU today 9) Taper dobutamine after ECG screening 10) TV = 180 ml/kg/day <ul style="list-style-type: none"> ca 10ml/kg 7.5% 150-P 3Na 5ml q2h ↑ 3ml qott. On feed 11) Monitor i cal. of gas. 12) cont lasix 80 mg/kg/dose 13) Trace vit D PTH 14) cont - calcimax plus <ul style="list-style-type: none"> - 250mg/kg/day - IV calcium 10ml/kg/day - Iy levels 15) Add maintenance Mg 0.2ml/kg in IVF. 16) Taper PEEP after Xray.
	<p>Noted by Swetha 01280f 29/04 @ 9 Am.</p>	



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order					
	Nutrition calculation on 27/4/26						
	max wt = 1.551						
	TN = 165ml/kg/day = 255ml EBM/DBM						
		Cal	Prot	Ca ²⁺	PO ₄	Fe	Vit D ₃
	EBM (67/ v1/35/15/0.2/-)	170	2.8	89.2	38	0.5	-
	MMF (0.5g x 12) (1.94/0.135/2.99/0.68/ 0.04)	23.3	1.62	35.8	8.6	0.48	-
	Vit D ₃ (800IU) 1ml OD						800
	Syrp Oscepan D - 1.5ml x 4 (25/11/40)			150	66		240
	Adphas (0.5ml x 2) 30mg				30		
	onefer XT (0.5ml x 1) (10mg)					5	
	total =	194	4.42	275.1	142.4	5.99	1040
	kg =	125	2.85	177.3	91.8	3.86	670

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PROGRESS NOTES AND DOCTOR'S ORDER

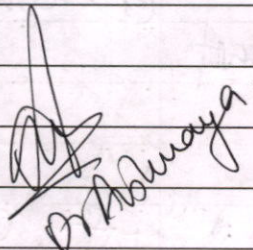
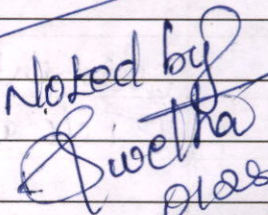
Date & Time	Progress Notes	Doctor's Order
29/4/26 1PM	Afternoon Rounds	
	on SPPV 19/6 $GO_2 - 30-1$ RR - 50/min $T_i = 0.35$	Plan ① cont same vent settings ② TV = 180ml/kg/day
	HR - 140/min sinus rhythm RR - 50/min $SpO_2 - 94.1$ BP - 71/44 (53) CRT < 2 sec PP - wf.	↓ 5ml/kg 10ml/kg rest ↑ 3ml/kg Calcium 7.5% on feed. fluo 480-P EBM/DBM
	No sedation - stopped in the morning	③ Trace Vit D + PTH ④ every (CPM) - gas + Ca + PO_4 + eBP + CRP
	No spent efforts / eye opening / limb	⑤ w/t ET suction ↑, cord cl ET & consider Abx
	livera ongoing. No further spasm episodes.	⑥ position change supine ⑦ up } 4m each. ⑧ up }
	Toluaty 5ml on feeds BA soft, non distended.	⑨ ECU now
	NGH -	⑩ cardiac screening & ⑪ dobutamine
	Xray - (R) UZ patch?	

Noted by
 Dr. Abhinav
 29/04 @ 1pm



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
29/4/26 4PM.	seen by Dr Pratyush	Plan
		① send ET ds ② positioning + chest PT gentle.
		③ If CBP + CRP worsening, send ET & blood c/s & start meropenem.
	PTc = 4 ⁹² .	④ taper rate & PIP after gas
		⑤ If PO ₂ < 7 & CO ₂ > 7, consider to stop levix
		⑥ (RN) evening reports & decide on TV
		⑦ t/m consider ECU if no spont movements.
		⑧ Taper & stop dobutamine by t/m.
	 Dr. Pratyush	⑨ t/m - CA PO ₂ SE.
		Noted by  Swetha 29/04/26 @ 4PM.

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PROGRESS NOTES AND DOCTOR'S ORDER

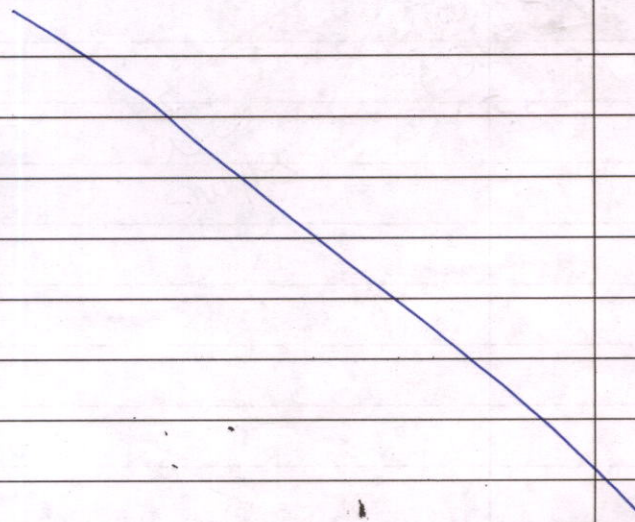
Date & Time	Progress Notes	Doctor's Order
29/4/26 9PM	Night Rounds	
	on PC - PEEP - 6 PIP - 18 Ti - 0.4 RR - 50/min FiO ₂ - 26.1	Plan ① dont change vent settings ② TV = 180ml/kg delay 8ml q2h 10ml/kg rest on EBM Calcein 750-180-1 + 3ml q8h Glucocort + 0.2ml/kg/day + Na ₃
	HR - 157/min SpO ₂ - 92% RR - 50/min	
	thick yellow ET secretion BP - 67/37 (47)	③ trace reports 2 Rv coarix, TV
	tolerating 8ml feed PA soft, non distended. stools passed	④ position change 2hly supine + @ up + @ up ⑤ ② Antibiotics & bloods
	No tetanus ep. No spontaneous breaths/movement No sedation	⑥ taper & stop dexamethasone ⑦ qm - Ca - PO ₄ - STE
	currently in @ up. ET cl sent	note 4 PM Jaroj (17256) 29/4 @ 9PM [Signature]
	W/O - 6:7mch Lewis BD W/O - 142/99 #48	[Signature]

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order															
29/4/26 10PM	Night Round.	Plan															
	Ca-7-2	① take blood clt															
	PO ₄ -6	② start by Neurophen															
	CRP 41	③ hold nursing loxia dost															
		④ TV=150ml/kg/day															
		<table border="0"> <tr> <td>8ml/kg</td> <td>8ml/kg</td> <td>Rest</td> </tr> <tr> <td>↓</td> <td>↓</td> <td>7-7-15 P</td> </tr> <tr> <td>IV Ca gluconate</td> <td>axfed</td> <td>MgO-2</td> </tr> <tr> <td></td> <td>↑ 3ml</td> <td>Na₃</td> </tr> <tr> <td></td> <td>66H</td> <td></td> </tr> </table>	8ml/kg	8ml/kg	Rest	↓	↓	7-7-15 P	IV Ca gluconate	axfed	MgO-2		↑ 3ml	Na ₃		66H	
8ml/kg	8ml/kg	Rest															
↓	↓	7-7-15 P															
IV Ca gluconate	axfed	MgO-2															
	↑ 3ml	Na ₃															
	66H																
		8ml/kg 4m after S/E															
		⑤ 4m cel ²⁺															
		PO ₄															
		S/E															

NO GAZ BY
 11/25/26
 29/4
 10PM
 Dr. Vijay



BAH-00650784

IP5-00171911

Baby Of P SANDHYA RANI

11-03-2026

0 Y 1 M 19 D

(M)

Dr. VIJAYANAND JAMALPURI



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order



30/4/26

DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 49. PMA:

Term Preterm Gestation : 28 + 6 Corrected Gestational Age: 35 + 6.

Problems :		
S.No.	Current	Past Problems
1.	Very PT / LBW / RD	
2.	Evolving c/o	
3.	Severe hypocalcaemia - tetany	
4.	Metabolic acidosis - resolved.	
5.	Hyperphosphatemia	
6.		

Today's Weight :

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂..... Oxygen : L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG: 7.33/53.7/25.3/2.3/3.5
 PC-A2. PIP-18
 PEEP-6
 FiO₂-32%
 Rate-45/min

Plan of Care :

HR-152/min
 SpO₂-96%
 RR-47/min
 Occ spont limb movements
 2 breaths.

Neurological Examination :

Sedation:

Last Neurosonogram : (0) Any Seizures:

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: 3.2 ml/kg/hr Stools: +

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: Amul Frequency: Q2H

TPN: Yes No - If yes, details: Calories:

Abdominal Examination:

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

Ca → 5.6 → 7.2 → 8.1 Na - (129)

PO₄ - 8.4 → 6 → 5.3

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : Plac D₃

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	SI.No.	Drugs	Days
		1.	Fortification 0.5 gm	
2.	37- Nall <u>→</u> <u>→</u> <u>→</u>		Syp ossepan 150ml/day - hold	
3.	ly overa 20ml/day		calmax plus 50ml/day.	
	ly meropenem D ₁		vit D ₃ - 800 IU.	
			onph XT - 4mg/kg/day	

Plan of Treatment :

ly fusidic acid - hold

ly Fulcon (P)

① cont current venti.

② TV = 150ml/kg/day

↓

↓	↓	↓
TUCA	14ml Q2H	Rest
5ml/kg	EBM ON.	7.57. LD - P
	+ 3ml Q6H	ly 0.2
	FF = 20ml	Na 3+3.

③ cont TV Abx - trace ET 2 blood cl s.

④ Position change 4hly sup
up
up

⑤ RU Carox today.

Doctor's Name (Handover given) : Dr. Ashwary

Signature : [Signature]

Date & Time: 30/4/20

Doctor's Name (Handover taken) : Y. Sneha

Signature : [Signature]

Date & Time: 30/4/2020



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
20/4/20	seen by Dr. Pratyush	Plan
	hypospadias ⊕	① PC - AC - 17/4 rate - 40
		FiO ₂ - 28
		② If every gas good, consider SMMV.
		③ Position change 4 hourly
		④ Surgical review before ⑤
		⑤ Next prick - NBS.
		t/m - Ca
		evening - PO ₄ .
		- CBP CRP
		- CBP + CRP.
		- S/G
		⑥ ^{levipid} levipid if baby is seizure free for 48hrs.
		⑦ Stop lasix.
		⑧ cont IV calcium till t/m cont oral calcium.
		⑨ Cas / ED. CRBS
		⑩ trace blood 2 BT 4s
		⑪ ^{extubation t/m} extubation t/m.
		⑫ Mg 0.2 Na ₆ Ca 5
		⑬ If selections are cephs,

[Handwritten signature]
 Dr. Pratyush

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		consider glycopyrrolate
	30/4/26	
	11:15 PM	Seen by A-NC Rd → Change to SIMV+PS PIP-16, PEEP-5 PS-13, Rate-30.
	30/4/26	
	11:20 PM	mean further and monitor.
	Afternoon Rounds.	Plan
	Resp: Baby on mech-ventilator SIMV+PS Ps-13 → 12, PIP-16 16 PEEP-5 Rate-30 FiO ₂ -30%	1) Continue SIMV+PS taper PIP as tolerated Target SpO ₂ 90-95% 2) TV = 15ml/kg (claus) 17 ml 2nd hly electrolytes 3) 3ml (6th hly) TF=20ml

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	last Gas	3) Gas } GRBS } BD
	T. 33 53.7 53.0 25.3 2.3 Lactate = 3.5 GRBS - 105mg/dl.	4) if ↑ ET secretions Consider Glycopyrrolate
	Intermittent desaturations (+) Active movements (+) Spont. trigger (+) No Hypotension No New Seizures.	5) Next pric = NBS. T/m evening → Ca, PO4 CBP CRP S/C
	<u>Vitals</u> HR = 174/min RR = 53/min SPO ₂ = 91% BP = 79/48 (59)	6) R/V - levipib to stop if No Seizures after 48hrs.
	ongoing Ca ²⁺ = 5mb/kg/d	7) Trace Blds, ETCS
	U/O = 3.8cc/kg/hr + 11 ml.	8) Flocharting 6th hrly 9) w/f - Brady, desat Tachycardia Seizures
		NECESSARY KARAJ (017886) Sreher 30/A 02pm

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 19 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
8/14/26 @ 3:40 PM		Seen by By PR Dr
		1) Chest x-ray T/m
		2) Don't Keep left up.
		3) Labs T/m
		4) wear TIP upto 15 PS upto 10.
		5) Note by Kondaveeti/4 @ 3:40 PM
		Sneha



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
30/03/26 10:30pm	Night Round.	
	on SIMV + PS. PS - 12, PIP - 15 PEEP - 5, Rate 30 FiO ₂ - 35% No desat / beady.	Plan. → Continue current ventilation ✓ → TV - 150cc/kg/day
	Vitals HR - 162/min RR - 68/min SpO ₂ - 93% BP - 75/45 (ST)	20ml/200kcal + Electrolyte full O ₂ feed ✓ → Send NBS, Ca ²⁺ , POU, CRP, CRP, S/E tomorrow morning
	Last gas: pH - 7.36, pCO ₂ - 44.2 Lac - 1.6, BE - -0.4 Ca ²⁺ - 0.94.	✓ → Chest X-Ray 7/m
	P/A - soft. No seizure activity.	✓ → Trace Blood & ET c/s
	NOGA BY varoj (17:30) 30/3 @ 10:30pm Poop	✓ → w/f beady, desat tachycardia, Seizures → 2 nd chesty 6th hly

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 19 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 19 D (M)
 Dr. VIJAYANAND JAMALPURI



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 50 PMA:

Term Preterm Gestation : 28+6 Corrected Gestational Age: 36 weeks

OVERVIEW	Problems :	
	S.No.	Current
1.	Very PT / EUBW / PD	Metabolic Acidosis
2.	Evolution CVD	Hyperphosphatemia
3.	Severe hypocalcaemia-tetany	
4.	Metabolic Acidosis	
5.	Hyperphosphatemia	
6.		

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂..... Oxygen : L/min

Last CXR : Spo₂.....

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours: On SIMV + PS → RR 12
15/5
RR - 30/min
FiO₂ - 30%

CARDIO VASCULAR SYSTEM

Plan of Care : HR - 156
RR - 38
SpO₂ - 95%
BP - 82/46/45
MAPS →
U.O → 3.5cc/kg/hr

CNS

Neurological Examination :

Sedation: -

Last Neurosonogram : (N) Any Seizures: NO

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: ml/kg/hr Stools:

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination:
*Went to clinic
 P/A - soft, tolerating feeds
 stools passed*

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION

Antibiotic	Sl.No.	Drugs	Days	
	1.	inj meropenam	D3	inj levofloxacin.
	2.	inj's		inj caffeine (symp)
	3.	inj flucanazole.	(P)	Calimax plus. vit D3 asofect

Plan of Treatment :

- Continue current ventilations
- Target SpO2 90-95%
- \dot{V}_E 150 L/day → \dot{V}_E comfortably DL ✓
- Electrolytes
- Do chart obliquely
- Gas } BD
- HBS } BD
- Bloods as Planned
- Plv to stop ampic
- Take bloody FiO2
- chest xray.

→ Positioning as Planned

Doctor's Name (Handover given) : *Raz*

Signature : *[Signature]*

Date & Time: *1/1/26*

Doctor's Name (Handover taken) :

Signature :

Date & Time:

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 19 D (M)
 Dr. VIJAYANAND JAMALPURI



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
11/5/26 #		<u>C/S/B → RPR</u>
10:10 AM		→ Change to PS/CPAP mode.
		PEEP → 6
		RR RR → 30
		PS above PEEP → 10
		→ Monitor work of breathing as required
		→ Blood gas @ 6 PM & exchange to NIPPV
		→ Rele cultures today
		→ Todd Colistin
		→ TO stop K Calcium Na, mg.
		→ try caffeine loading @ 10mg/kg
		→ change caffeine regimen to IV (10mg/kg/day)
		→ LP today after 24h -> add phosphate 10m



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	ERUS - s/o klebsiella Calbapam sensitive (verbal report)	stop cepipill today
		+ give inj. meropenem infusion over 2 hours.
		Seen by Dr. Pratyak
<u>11/5/26</u>		<u>Plan:</u>
<u>3:50 PM</u>		- continue SIMV + PS
		- change to PSV mode TIm Morrey
		- change the medication
		- once baby activity improves, change to PSV mode
		- Send NBS (Hold)
		<i>[Signature]</i>

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 11-03-2026 0 Y 1 M 19 D (M)
 Dr. VIJAYANAND JAMALPURI



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
11/5/26 8:27 PM	<p>on A → on SIMV + PS mode VAP - klebsiella pneumonia</p>	<p>Adv - Resp filter - Isolate ^{by} screening - CBP raw</p>
11/5/26	<p>→ A <u>Night Notes</u></p>	<p>Adv • continue current ventilator</p>
	<p>A - On SIMV + PS mode B PIP = 16 / PEEP = 6 / Rate ⇒ 30 PS = 5 PS - 11 (above PEEP)</p>	<p>• plan to change to PSV mode - T/M once baby activities improves. • Respiratory filter + Barrier Nursing</p>
	<p>- No brady, desat</p>	
	<p>- Re Copious secretions needing suction.</p>	<p>• CBP - to trace</p>
	<p>Last gas - 7.32 / 49.2 / 2.0 / 23.6</p>	<p>• TU - 150 cc / kg / day</p>
	<p>→ No icn draps, HR = 136</p>	<p>20ml 20ml - 2 hourly</p>
	<p>BP = 64/36</p>	<p>OA feeds.</p>
	<p>U/O = 2.1 cc / kg / day</p>	
	<p>I/O (+ 77.6) on full feeds.</p>	<p>→ GAS / BD CRBS</p>
	<p>Oedematous.</p>	
	<p>→ Temp → 36.4</p>	<p>→ W/F see secretions ET blockade</p>
	<p>→ Feeds tolerating</p>	
	<p>→ CRBS - 78</p>	<p>→ Hand wash & hygiene after handling Patient</p>

NO BARRY
 VARDI (CRBS)
 11/5 @ 10 PM

2/05/26

DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 51 PMA: 36+1

Term Preterm Gestation : 28+6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	Very PT / E / BW / RD	
2.	Evaluating CI	
3.	Severe Hypocalcaemia	
4.	Jelany	
5.	VAP - Klebsiella	
6.		

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂..... Oxygen : L/min

Last CXR : SpO₂.....

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours..... On PE (Pressure Control)

Last gas: F_iO₂ 0.21, PCO₂ 60, PO₂ 35.8, Lac - 3.4 / BE - 1/23

PJP - 16, PEEP - 6, Rate - 40

CARDIO VASCULAR SYSTEM

Plan of Care : HR - 171
 SpO₂ - 98%
 RR = 40/mi.

Oedematous
 Genitalia oedematous
 Copious ET secretion.

CNS

Neurological Examination : limb movement (A)

Sedation..... NO

Last Neurosonogram : (N) Any Seizures..... NO

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: $207/5/1hr$ ml/kg/hr Stools:

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: Frequency: $(+ 138.4 ml)$

TPN: Yes No - If yes, details: Calories: $positive$

Abdominal Examination: $balab$

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

$Sugar \downarrow 100$

$106 ml$

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	Sl.No.	Drugs	Days	
		1.	Inj Meropenem	(24)	
2.	Inj Calistin	(22)		Calcimax - plus sya	
3.	Inj Fluconazole	(P)		Picc-D4	

Plan of Treatment :

- Continue current ventilation
- TV - 150 cc/kg/day - 20ml - 2hault Oh feeds
- Gas - BD
- GRBS - BD
- Handcare & hygiene after handling
- No monitoring 6th hourly

Doctor's Name (Handover given) : Reeparyalo

Signature :

Date & Time: 2/5/26

Doctor's Name (Handover taken) : Y. Sreha

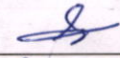
Signature : Sreha

Date & Time: 2/5/26

BAH-00850784 IP5-00171911
Baby Of P SANDHYA RANI
11-03-2026 0 Y 1 M 16 D (M)
Dr. VIJAYANAND JAMALPURI



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
23/4/26 @10:30am	B/O : Sandhya Rani	
	<ul style="list-style-type: none">- Baby maintaining on fFNC - 4/1m- There is some Rapid wt increase- we are giving dose of diuretic	
	<u>Sneha</u> Resident	 (mother)

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Baby Of P SANDHYA RANI
11-03-2026 0 Y 1 M 16 D (M)
Dr. VIJAYANAND JAMALPURI




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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
21/4/26	B/D Seisava Sandhya Rani	
	to cont HFNC	
	cont initiate NNS	

BAH-00650784 IP5-00171911
Baby Of P SANDHYA RANI
11-03-2026 0 Y 1 M 16 D (M)
Dr. VIJAYANAND JAMALPURI



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	19/4/26	B/o. sandhya rani
	- ↓ HMC to uterus	
	- wt. gain present	

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 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 19 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
2/5/2026 @ 10:40 am		<p>Seen by Dr. Prathu</p> <ol style="list-style-type: none"> 1) 1 stat dose Glycopyrrolate 2) change to SIMV+PS 18/b, PS=14. RR=40. 3) Start Neb. Colistin. 4) Chest X-ray evening 5) Ensure Optimum Humidification 6) 1 stat lasix dose. 7) Suctioning as required. 8) Trace - B/c/s 9) Trace - final ETC/s with Sepsis 10) CBP CRP S/Ie Ca²⁺ PO₄²⁻ } T/m morning 11) F. Tacomix nebulisation to add

Noted by
 Arca 015566
 10:50 AM - 2/5/26.



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
2/5/26 @ 1:30pm	Afternoon Rounds	Rounds
	Respiration	Plan
	Baby on Ventilation	
	SIMV + PS	Cont. Current ventilation
	PIP-18, PEEP-6	Target SpO ₂ 90-95%
	RR-40, PS=14	Fu = .15g mb/kg/day
	FiO ₂ - 26%	↓ full feed
	↓	20mb 2nd bsky
	No Bradycardia	Gas, GRBS-BD
	Desaturation	Continue Nebulisation
	NO tetanic spell/seizure	Mucosin, Colistin
	Spontaneous Breaths (+)	w/lt - ET secretion
	Spont movements (+)	Suction as required
	Eye opening (+)	Chest X-ray - evening
	<u>Vitals</u> HR = 166/min	Trace - B/cls
	RR = 45/min	CRP, S/E, Ca ²⁺ , PO ₄ ⁻² - T/m
	SpO ₂ = 96%	morning
	BP = 73/51 (47)	No chattering
	PIA - Soft	w/lt - vitals
	Noted by	Snelva
	Aswini 01/5/26	
	2pm 2/5/26	

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		Seen by Dr. Prathym
		1) Change - Humidifier
		2) Gas - BD
		GRBS - BD
		Notified by Arun 015566 3PM - 2/5/26 Sneh
2/5	Night rounds	
8:30 PM	5/1 don't 28 + 30 + 1 w kg play	
	v - baby on 18/6 safe - 40	Continue SIMV + PS mode
	PS-12	target - SpO2 - 90-95%
	fio2 - 30%	
	gas -	TV - 150ml/kg/day
		fall of feed - 20ml slowly
	C - RR - 170 bpm	
	BP - 67/39 (99)	Trace chest x-ray
	U/O - 5.3ml/kg/hr	cep / se / calcium
		PO4 - 1.1m
	P/A - to creating	plw - ossopan-D

feed
 No (ca) (ca)
 KNO3 (KNO3)
 2/5 @ 8:30 PM
 monitor vitals
 by nurse/doctor

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		seen by Dr. Pratyaksh
		Dr
		Continue
		Diseases with lung main regarding Calcium & phosphate
		Calcium - 150mg/kg/day PO4 - 75mg/kg/day to give
		check weight today
		NOGARY KANU (17256) 3/5 @ TA

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 21 D (M)
 Dr. VIJAYANAND JAMALPURI



Handwritten initials



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 52 PMA: 36+2

Term Preterm Gestation : 28+0 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	VPT (ELBW) RD	
2.	VAP - klebsiella	
3.	hypocalcaemia	
4.	teranyl	
5.	excreting green CSF	
6.		

Today's Weight :

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV INO PPM

Ventilator Settings : PIP 18 PEEP 6 VG slow Rate 40 FiO₂ 25 Oxygen : L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG : 7.47 / 35.9 / 2.5 / 26.5

Change over the Last 24 Hours :

Plan of Care : continue current ventilation

Neurological Examination :

Sedation : 1

Last Neurosonogram : (N) Any Seizures :

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: ml/kg/hr Stools:

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination: *soft to cradling*

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	SI.No.	Drugs	Days
		1.	<i>uroopenans</i>	<i>D5</i>
2.	<i>colistin</i>	<i>D3</i>		
3.	<i>flucon</i>	<i>(P)</i>		

Plan of Treatment :

- ① continue current ventilation
target SpO_2 - 90-95.
- ② IV - 150ml/kg/day - feed - 20ml/2hrs
full of feed
- ③ gas } BD
RBS }
- ④ check weight today
- ⑤ LRS transfusion today
- ⑥ Discuss - veno nam regarding calcium phosphate

Doctor's Name (Handover given) : *Dr. namul*

Signature : *[Signature]*

Date & Time: *3/1/22*

Doctor's Name (Handover taken) :

Signature :

Date & Time:

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PROGRESS NOTES
 (USE BALL POINT PEN ONLY)

DATE	TIME	(SIGN ALL ENTRIES, DATE & TIME OF EACH ENTRY IS COMPULSORY)
3/4/26	11:30 am	<p>Hb - 9'</p> <p>Plan for LRBC</p> <p>Keep NPO 4 hours prior, 4 hours during LRBC transfusion</p> <p>Do CRAS 2u post transfusion</p> <p>Decide on feeds as per LRBC protocol</p> <p>Notified by Arun 05566 11:30 AM - 3/4/26</p>
<u>Evening notes</u>		
3/5/2026	8pm	<p>Baby on SIMV+PS</p> <p>12/6. PS-14</p> <p>Rate 40</p> <p>No brady / duatwater</p> <p>On going LRBC transfusion</p> <p>Vital - HR - 160/min</p> <p>RR - 44/min</p> <p>SpO₂ - 95%</p>

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

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PROGRESS NOTES
 (USE BALL POINT PEN ONLY)

DATE	TIME	(SIGN ALL ENTRIES, DATE & TIME OF EACH ENTRY IS COMPULSORY)
		<u>PLAN</u>
		→ Continue current ventilator
		→ Continue NPO during transfusion
		→ Blood gas this after transfusion.
		→ To restart feeds this post transfusion initial 1/2 feed then full feed
		NO CAT BY → ARBS BID
		KASAP (17855)
		2/10 @ 10 PM →

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



4/5/26

DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 53 PMA: 36^w3^d

Term Preterm Gestation : 28^w6^d Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	VPT / OLBW / RD	
2.	VAT - plebscika	
3.	Hypokalemia	
4.	Severe CLD	
5.		
6.		

Today's Weight : 1.863

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV INO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂..... Oxygen : L/min

Last CXR : Spo₂.....

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours: on SIMV + PS

one LPBC transfusion

16/6
RR-30
FiO₂-30%
HR-(64)/min

Plan of Care :

RR-33/-
SpO₂-93%
BP-63/33/57

Neurological Examination : Sedation..... No

Last Neurosonogram : Any Seizures..... no

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: ml/kg/hr Stools:

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination: *P/A - soft, tolerating feed*

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	Sl.No.	Drugs	Days	
		1.	Mecopenam	06	
2.	Colistin	Dy			
3.	Flucanazole	(8)			

Plan of Treatment :

- Continue current ventilation
- target SpO₂ 90-93%
- TV - 120 cc/kg/day zone 2 only ok
- Gas }
TARBS } BD
- R/O with ~~Chest enter~~ Endocrinologist
- No chest xray
- monitor vitals

Doctor's Name (Handover given) : *AKS*

Signature : *[Signature]*

Date & Time: *4/5/26*

Doctor's Name (Handover taken) : *Y. S. S. S.*

Signature : *[Signature]*

Date & Time: *4/5/26*

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PROGRESS NOTES

(USE BALL POINT PEN ONLY)

DATE	TIME	(SIGN ALL ENTRIES, DATE & TIME OF EACH ENTRY IS COMPULSORY)
4/5/26	11 am	Seen By Dr. Prathiyulu
		1) Ventilation change ↓ Rate - 30/min PIP - 16/6
		Hypospadias
		2) chest x-ray - Now
		3) - Giving @ 4ppm change to PSV ↓ Do a Gas at 10ppm (6hrs after PSV mode)
		4) Discuss with Dr. Leena mam ↓ change to Ossopan-D
		5) Plan of extubation Tomorrow.
		6) CBP, CRP - Tomorrow
		7) Check weight.
		8) Labs & stat - Just send

Noted by
 Agnes
 at 11:55

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



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PROGRESS NOTES

(USE BALL POINT PEN ONLY)

DATE	TIME	(SIGN ALL ENTRIES, DATE & TIME OF EACH ENTRY IS COMPULSORY)
		<u>Nutrition</u>
		- 20ml - 12 hourly - 240
		FROM EBM = Cal Pro Ca PO4 Fe Vit-D
		160.8 2.64 84 36 0.48 -
		calcimar 120mg
		86.31 1.43 111 19.3
		WT 1.865
		<u>Afternoon Notes</u>
		<u>Plan</u>
15/3		Current issues
		VAP
		On SIMV + PS
		PIP = 15
		PEEP = 6
		Rate = 30
		PS = 8+6=14
		Tv-generality = 23-35
		⊗ plan to change to PSV by 4pm
		⊗ Endocrinology opinion
		O/E - Tube secretions → needing airway clearance
		⊗ Feed - 20ml - 2hour @ 150cc/kg/day
		- SEA ⊕
		Circulation → No on exam No hypertension
		⊗ GAS - 10 pm CRBS

NOTE: DO NOT WRITE OUTSIDE THE MARGINS

10 → 3.7cc/kg/hour

PROGRESS NOTES

(USE BALL POINT PEN ONLY)

DATE	TIME	(SIGN ALL ENTRIES, DATE & TIME OF EACH ENTRY IS COMPULSORY)
4/5/26		Feeds are tolerated (X) CBP, CRP along c gas & Urea + 1M. 100
		Noted by Agnes at 3.40pm 08/06/26
4/5/26	11pm	<u>Night Rounds</u>
		<u>Resp:</u> Baby on PSV. Recurrent - Triggering of Backup ventilator. ⊙ Apnea ↓
		<u>Plan</u> 1) Continue SIMV + PS PS - 10 Target SpO ₂ 90-95%.
		Charged to SIMV + PS PIP - 15, PEEP - 6 Rate - 30 PS - 10 Ti = 0.89.
		2) TV = 150ml/kg/d 20ml 2nd hly full oxygen
		3) Glaucoma GRBS } BD
		⊙ mild SCR ⊕ ⊙ vitals HR = 154/min RR = 34/min

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

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PROGRESS NOTES

(USE BALL POINT PEN ONLY)

DATE	TIME	(SIGN ALL ENTRIES, DATE & TIME OF EACH ENTRY IS COMPULSORY)
		SPO ₂ - 96% BP = 70/42(52)
		4) CBP CRP } T/m
		ET Secretions leucocytosis (+)
		5) Rx on Ossopar-D 3mg/PO/TID T/m
		P/A - soft Tolerating feeds well
		6) w/ apnea, Bradycardia
		<u>Sneha</u>
		noted by Bro. Suresh 13/3/26 08:11 PM

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 22 D (M)
 Dr. VIJAYANAND JAMALPURI



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : PMA:

Term Preterm Gestation : Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	VPT/CBWS/RD	
2.	VAP - Klebsiella	
3.	Hypokalemia	
4.	Hypocalcemia, Hyperphosphatemia	
5.	Met CID	
6.		

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....FiO₂.....Oxygen :L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours.....

Baby on SIMV + PS
 PIP - 15, PEEP - 6
 PS - 10
 Rate - 30/min

CARDIO VASCULAR SYSTEM

Plan of Care :

HR = 165/min
 RR = 45/min
 SpO₂ = 95%
 BP = 72/57 (62)

Ti = 0.39
 mild SCR (+)
 Did not tolerate Psv mode,
 ET Secretions (+)

CNS

Neurological Examination :

..... Sedation.....

Last Neurosonogram : Any Seizures.....

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input : / (+/-) Output : ml/k/d Urine Output : ml/kg/hr Stools :

IV Fluids - Type of IVF : @ ml / hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN : Yes No - If yes, details : Calories:

Abdominal Examination:

U/O = 2.8cc/kg/hr
+ 120.8ml

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

Pln - soft stool - passed
tolerating feeds

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	SI.No.	Drugs	Days
		1.	Meropenem	D ₇
2.	Colistin	D ₅		
3.	fluconazole	(P)		

Plan of Treatment :

- 1) Continue current ventilation
Target SpO₂ 90-95%
- 2) TV = 150ml/kg/day - 20ml 2nd hrly
full OG feeds
- 3) Rlv to add ossopan-D - 3ml/a/d
- 4) Glas, GRBS - BD
- 5) I/O charting 6th hrly
- 6) monitor vitals, w/f - apnea, Brady.d
- 7) Trace - cBP, CRP

Doctor's Name (Handover given) : Y. Sneha

Signature : Sneha

Date & Time : 5/5/26

Doctor's Name (Handover taken) :

Signature :

Date & Time :



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PROGRESS NOTES

(USE BALL POINT PEN ONLY)

DATE	TIME	(SIGN ALL ENTRIES, DATE & TIME OF EACH ENTRY IS COMPULSORY)
<u>5/5/26</u>		<u>Chk/B → DR PR</u>
<u>10:11AM</u>		<ul style="list-style-type: none"> → Ges DP. → Ges 0.5mg/kg w → Add Desopam Add 0.5gm mmf in each feed. → chest xray film → Sedulation film → Add desopam H (Ravi)
		<p>Noted by Eges 019085 at 10:15AM</p>

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



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PROGRESS NOTES

(USE BALL POINT PEN ONLY)

DATE	TIME	(SIGN ALL ENTRIES, DATE & TIME OF EACH ENTRY IS COMPULSORY)
		<u>Night Note</u>
5/5/26	10:00 PM	On SIMV + PS made
		14/6 Rate - 25 PS - 10
		• No Brady brad
		• Breathing comfortable
		• P/A soft
		<u>Plan</u>
		- TV - 150 cc / 4 / day
		20 ml - 2 hourly
		+ 0.5 mg q 1 each
		MMF - 2 hourly
		- RBS - BD
		- GAS - OD
		- CRP - T/M
		- Plan for extubation
		T/M.
		Pupisa

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BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 22 D (M)
 Dr. VIJAYANAND JAMALPURI



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 55 PMA: 36 + 6

Term Preterm Gestation : 28 + 6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	VPT / ELBW / RD	hypocalcaemic tetany
2.	VAP - Klebsiella	
3.	severe ECD (grade III)	hypophosphatemia
4.		
5.		
6.		

Today's Weight :

Respiratory System

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV INO PPM

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....FiO₂.....Oxygen :L/min

Last CXR : SpO₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours: on SIMV + PS mode

FiO₂ - 23 14/6 - Date - 25 PS-10

PH = 7.43 / pCO₂ - 35.5 / 55.2 / 2.2 / 0.0 / 24.1

→ PSV -

Cardio Vascular System

Plan of Care : HR - 160

o SpO₂ = 93%

RR = 31

BP = 91/57/60

CNS

Neurological Examination :

Sedation : no

Last Neurosonogram : Any Seizures : no

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: ml/kg/hr Stools:

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination:

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	SI.No.	Drugs	Days	Notes
		1.	Inj Meropenem	6	
2.	Inj calistin	6			
3.					

Plan of Treatment :

- Changed to PSV mode
- plan for extubation later.
- TV - 150 cc / kg / day - 20 ml hourly full O2 feeds + 0.5g fortification
- GAS - GRBS - BD
- N/F apnea, brady disab

Doctor's Name (Handover given) :
 Signature :
 Date & Time: 6/5/26

Doctor's Name (Handover taken) : Dr. Manilla
 Signature :
 Date & Time: 6/5/26



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PROGRESS NOTES

(USE BALL POINT PEN ONLY)

DATE	TIME	(SIGN ALL ENTRIES, DATE & TIME OF EACH ENTRY IS COMPULSORY)
		Dr. Jay
		<ul style="list-style-type: none"> → Ziv Nexa 0.1mg/kg stat (2x) → Exubate to <li style="margin-left: 100px;">NIPPV @ 18/7/46/30/. <li style="margin-left: 100px;">Ti 0.4 → nebulators <li style="margin-left: 20px;">- 2 Alendine back to back → L₁ Percly 2 2H R+up / 1up <li style="margin-left: 20px;">(+) → chest X → Jan 2 hrs post Exubate → CR blood post Exubate
		<p>noted by Jay at 10:30 AM</p>

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

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PROGRESS NOTES

(USE BALL POINT PEN ONLY)

DATE	TIME	(SIGN ALL ENTRIES, DATE & TIME OF EACH ENTRY IS COMPULSORY)
6/5	2:20PM	intubation notes
		under all aseptic precaution baby was intubated to NW 18/c rate-45 baby tolerated the procedure well
		Ad gas-eyes shows
6/5	2:30PM	→ baby on NW- 18/c rate-45 $PO_2-30\%$ $TI-0.45$ play Continue NIV 18/c target SpO_2 90-95%
		NO retractions NO stridor C → HR-150 bpm BP U/O
		→ do a CBG gas should check resp eyes should TV - 150ml/kg/day give 1/2 feed 10ml should give CBG if vol: then full of feed R Tr. navel
		P/A - no distension stool passed
		noted by Dr. [Signature] 12/3/2026

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

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PROGRESS NOTES

(USE BALL POINT PEN ONLY)

DATE	TIME	(SIGN ALL ENTRIES, DATE & TIME OF EACH ENTRY IS COMPULSORY)
6/5	2:30 PM	<p>play</p> <p>- positioning RT UP / Lt UP / 2h09 / 2h09 / 2h09</p> <p>- chest physiotherapy</p> <p>Dr. Nandha</p>
		<p>Noted by Agnes at 2:30pm</p> <p>019085</p>
6/5/26	@ 8:30 PM	<p><u>Night Notes</u></p> <p>Baby on NIV - PIP-17 on mask. PEEP-6. RR-40/min. SPO₂ FIO₂ - 21% Fi = 0.45/min.</p> <p>No Respiratory distress No Brady, desatual Cry - +loarse (+)</p> <p><u>Vitals</u></p> <p>HR = 160/min R/S - BAC (+) RR = 40/min clear SPO₂ = 96% No stridor BP = 70/41(51) No wheeze</p>

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



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PROGRESS NOTES

(USE BALL POINT PEN ONLY)

DATE	TIME	(SIGN ALL ENTRIES, DATE & TIME OF EACH ENTRY IS COMPULSORY)
		last Blood gas
		7.43 / 93.3 / 67.4 / 23.5 / -1.5
		lac = 1.8
		Tolerating feed.
		NO vomiting
		Abdomen - distended
		edema (+)
		<u>Plan</u>
		1) continue NIV = 17/6, Rate - 40/min
		Fi = 0.45
		Target SpO ₂ 90-95%
		wear PIP if tolerating
		2) TV = 150 ml/kg/day
		2omv 2nd brly + 0.5g MNF
		3) chest x-ray NOW
		4) S/T charting 6th brly
		5) w/f - apnea, TD, Brady, desat
		6) Positioning - Rt up - 2hrs
		lt up - 2hrs
		Supine - 2hrs
		7) chest physiotherapy
		Sreha residental
		Noted by Koushik 60306 at 8:30pm

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : ~~54~~ 56 PMA: 37

Term Preterm Gestation : 28+6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	VPT / URW / RD	Hypocalcaemia
2.	VAP - Klebsiella	retary
3.	848 gm → 1850	Hyperphosphatemia
4.	severe CN grade 2	
5.		
6.		

Today's Weight : 1.598 kg ~~to 850~~ ~~108 gm~~

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂..... Oxygen : L/min

Last CXR : Spo₂.....

ET Secretions : Clear Thick Yellow Last ABG : PH-7.57, pCO₂-20, Lac-5.2, Base -2.9

Change over the Last 24 Hours : PO₂-64.9, HCO₃-23.6

NIPPV - PIP-17, PEEP-6 - Rate 40/min, Ti 0.45
 FiO₂-21%

Plan of Care :

SpO₂ - 98%
 HR - 120/min
 RR - 39/min
 BP - 86/68 (73)

Neurological Examination :

Sedation

Last Neurosonogram : Any Seizures

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: ml/kg/hr Stools:

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination:
Mild Distension, soft

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

Antibiotic	SI.No.	Drugs	Days	
	1.		inj. Meropenem D7	D7
2.		inj. colistin D7	D7	
3.				

Plan of Treatment :

1. Continue NPTT. PIP-17, ARBP-6
Rate - 40 ml/hr TPO.45
2. TU - 150 ml/kg/day - 20ml 2H + 0.5gm mof
3. Do change 6hr hourly.
4. Monitor vitals.
5. GAD-OD
6. GRBS - 80.
7. $\left. \begin{matrix} \text{Supine} \\ \text{RTUP} \\ \text{LUP} \end{matrix} \right\} \text{change } \bigcirc$

Doctor's Name (Handover given) : *N. Prakash*
 Signature : *NPS*
 Date & Time: *07/05/20*

Doctor's Name (Handover taken) : *D. Maulik*
 Signature : *[Signature]*
 Date & Time: *[Signature]*

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI (M)
 11-03-2026 0 Y 1 M 22 D
 Dr. VIJAYANAND JAMALPURI



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
7/5/26 2:40pm	Afternoon Round	
	on CPAP, PEEP - 7. No beady/desat.	
	<u>Vitals</u> HR - 158/min RR - 43/min SpO2 - 100% BP - 77/42 (55)	<u>Plan</u>
	P/A - soft	<ul style="list-style-type: none"> → Continue CPAP - 7. → IV - 150cc/kg/day 20ml 2nd hely. + 0.5g mmf.
		<ul style="list-style-type: none"> → Send CBP } CRP } T/m
		<ul style="list-style-type: none"> → No charting 6th hely.
		<ul style="list-style-type: none"> → w/f beady/desat.
		<ul style="list-style-type: none"> → Gas } RBS } OD
		<ul style="list-style-type: none"> → Positioning - Supine } Rt up. } 2 hely Lt up }

Noted by
 Anil
 Jaiswal
 at 2:40pm



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
7/5/23 11:30pm	NIGHT ROUNDS	Seen by Dr. Vinub
	On CPAP	
	PEEP - 7.	→ Continue CPAP - 7.
	No brady, desaturation	
	Tolerating feeds well.	→ Feed - 20ml 2nd hly
	Vital - HR - 156/min	+ 0.5g NMR
	RR - 40/min	→ Send CBP } 2/4
	SpO ₂ 99%	CRP
	BP 74/27(40)	
	RA - soft, no distention	→ RBS } 0D
		Gas
		→ Continue positioning ^{Supine} Rtl up
		→ I/O charting ^{hourly} 6
		hourly.
		→ w/f ↑wOB, brady,
		desaturation.
	Noted by	
	MAMUK	
	605386	
	w/ 11:30pm	

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 25 D (M)
 Dr. VIJAYANAND JAMALPURI



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 57 PMA: 37+1

Term Preterm Gestation : 28+6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	VPT/VLBW/RD	Hypocalcaemia
2.	VAP - Klebsiella	Tetany
3.	CLD - grade 2	Hyperphosphatemia
4.		
5.		
6.		

Today's Weight : 1.642 ↑ 44gms

VENTILATORY SUPPORT : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....FiO₂.....Oxygen :L/min

Last CXR : Spo₂.....

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours..... on CPAP

Plan of Care :

HR - 142/min
RR - 48/min
SpO₂ - 96.1
BP - 72/42(51)

Neurological Examination :

Sedation.....

Last Neurosonogram : Any Seizures.....

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input : / (+/-) Output : ml/k/d Urine Output : ml/kg/hr Stools :

IV Fluids - Type of IVF : @ ml / hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN : Yes No - If yes, details : Calories:

Abdominal Examination:

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION

Antibiotic	Sl.No.	Drugs	Days
	1.	Sup Meopera m	DB
	2.	Sup. Colistin	DB
	3.		

Plan of Treatment :

- Continue CBAP
- TV - 100cc/kg/day → 20 ml/kg daily fortification
- No clauing strictly.
- Monitor vitals
- Gas - OD
- RBS - BD
- Supine 2
 1st up - 1 hr each
 2nd up

Doctor's Name (Handover given) : Dr. [Signature]

Signature : [Signature]

Date & Time : 8/1/20

Doctor's Name (Handover taken) :

Signature :

Date & Time :

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 25 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
8/5/26		Seen by Dr. Leatyuli
		→ CPAP - Ram's cannula
		PEEP - 7.
		↓
		PEEP - 6 by evening
		→ Positioning.
		(5gms x 15 seconds)
		→ IV - 16cc/kg/day
		2ml/2nd hrly
		+ 1/2 g MMF.
		→ Continue IV
		antibiotics
		for 2 days.
		Noted by
		Anel
		at 11:30 AM

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
8/5/26 3PM	Afternoon Round	
	on CPAP to Ram's PEEP - 6	
	NO brady desat	
	<u>Vitals.</u>	<u>Plan.</u>
	HR - 174/min	→ Continue CPAP to
	RR - 42/min	Ram's @ PEEP - 6
	SpO ₂ - 94%	
	BP - 72/47 (SQ)	→ IV - 160cc/kg/day
	P/A - soft	2ml/2nd hly
		0.5g x 1.5 sachets
		→ 100 w/ brady/desat
		→ Monitor vitals
	Noted by Sonal 10:00 AM at 3PM	Rogate



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
25/3/26 5:15pm		Seen by Dr. Vijayanand
	PICC line - Dio.	→ Continue CPAP - 6cm
		→ Blood gas twice weekly.
		→ R/v PICC line - I/m. R/v antibiotics
		→ Continue full ory feeds.
	Prophylaxis	
	Neotred by Agnes	
	at 5:15pm	

Dr. VIJAYANAND JAMALPURI
 Reg. No. 40526



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
8/5/26 8PM	Night Round	
	Currently baby is on CPAP - Rami, PEEP 6 FiO ₂ 21%	
	No breath/ delay	
		Plan
	Vitals: HR - 162/min. RR - 40/min. SpO ₂ - 92%. BP - 87/52 (64)	→ Continue CPAP - 6 → TV - 160cc/kg/day 2ml/2nd half (OC) 0.5g x 1.5 sachets
	P/A - soft.	→ Blood gas twice weekly - RBS - OD
		→ R/v PICC line 1m R/v antibiotic 1m
	Noted by Agnes class at 8pm.	Popilia

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 25 D (M)
 Dr. VIJAYANAND JAMALPURI



9/5/26



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 58 PMA: 37+2

Term Preterm Gestation : 28+6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	<u>VP+V/LBW/RD</u>	<u>Hypocalcemia</u>
2.	<u>VAP - Klebsiella</u>	<u>Hyperphosphatemia</u>
3.	<u>ILD - grade A</u>	<u>Tetany</u>
4.		
5.		
6.		

OVERVIEW

Today's Weight :

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV INO PPM

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....FiO₂.....Oxygen :L/min

Last CXR : Spo₂.....

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours..... on CPAP, PEEP 5cm

No brady/ desat

RESPIRATORY SYSTEM

Plan of Care :

HR - 153/min.

RR - 42/min

SpO₂ - 96%

BP ~~155/75~~

BP - 78/40 (54)

U/O

GRBS

CARDIO VASCULAR SYSTEM

Neurological Examination :

..... Sedation.....

Last Neurosonogram : Any Seizures.....

CNS

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input : / (+/-) Output : ml/k/d Urine Output : ml/kg/hr Stools :

IV Fluids - Type of IVF : @ ml / hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN : Yes No - If yes, details : Calories:

Abdominal Examination: **TV - 150cc/kg/day**

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

PLA - soft

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:


Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	Sl.No.	Drugs	Days	Fortification	Other
		1.	Inj. Meropenam	D9	Portification	Profel XT
2.	Inj. Colistin	D9	Meb - Colistin	UFD3 drops		
3.	Inj. Fluconazole	(P)	neb - Mucormix	PICC - DU		
			Syp. Omperon D	Tubings - D12		
			Inj - Caffeine			

Plan of Treatment :


- Continue CPAP-5, Target SpO₂ 90-95%.
- TV - 150cc/kg/day → ~~20ml~~ 22ml 2nd hly + 0.5g x 1/2 sachet fortification (OU)
- Rfv PICC line today
- Rfv antibiotics today
- CBL - twice weekly.
RBS - OD
- w/f beady / desat

Doctor's Name (Handover given) : **Booptha**

Signature : 

Date & Time : **9/5/26 Same**

Doctor's Name (Handover taken) : **Dr Ashwanya**

Signature : 

Date & Time : **9/5/26**

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 25 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
9/5/26 8:40am		Seen by Dr. Vijayanand
	PEEP 5 → 6.	→ CPAP - 6cm Continue
		→ Blood gas - twice weekly
		→ Remove Pice line
		→ Stop Neupenam after afternoon dose
		→ Stop all antibiotics
	<p>to Roopika noted by Sanya 9/5 @ 9AM</p>	

Dr. VIJAYANAND JAMALPURI
 Reg. No: 40526

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 25 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
9/5 11 PM	evening rounds	
	D58 / 28+6wks → 37+2wks /	
	V → baby on CPAP-6 FiO ₂ 21% minimal retractions	plan continue CPAP-6 target SpO ₂ 90-95%
	C → NR - 1556 PM Bp 63/50 (54) U/O -	TV - 160ml/day 2-2ml 2 hourly + MMF 0.5gm 1/2 sach full O ₂ feed
	P/A - soft to creating feeds	remove Poulina after afternoon dose of antibiotics
		stop antibiotics after 2pm dose
		CBG - twice weekly URES - OD
		W/F Brady / deactivation noted by Sanya 9/5 @ 2 PM 1st manual

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 25 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
9/5 @ 3:30 PM		seen by Dr. Vijayanand sir
		<p>→ continue CPAP - 6</p> <p>→ leucine PTUline</p> <p>→ stop the antibiotics</p> <p>noted by Seiya 9/5 @ 3:40 PM Dr. Manoj K.</p>
9/5/26 11 PM	Night Rounds seen by Dr. Nilesh	
	<p>set PEEP 7, delivered 8. on CPAP ramps. HR - 142/min SpO₂ - 98%. RR - 26/min</p> <p>on full OR feeds PA - csgo. passed stool</p> <p>All removed.</p>	<p>Plan</p> <ol style="list-style-type: none"> ① change ventilator. ② cont CPAP 2 ramps PEEP 6cm ③ TV = 160 ml/kg/day 22ml B2H + 0.5gm MMF 1 1/2 sachet. ④ Add 37 Maccl 3mg ⑤ CBC twice weekly RBC OD

BAH-00850784
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 30 D (M)
 Dr. VIJAYANAND JAMALPURI

IPS-00171911

B/o Sandhya Rani



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 59 PMA: 37+3

Term Preterm Gestation : 28+0 Corrected Gestational Age:

OVERVIEW	Problems :	
	S.No.	Current
1.	<u>VPT/VLBW/RD</u>	<u>Hypocalcaemia</u>
2.	<u>VAP - klebsiella</u>	<u>Hypophosphatemia</u>
3.	<u>CLO - grade II</u>	<u>Tetany</u>
4.		
5.		
6.		

Today's Weight : 1.742 (151gm)

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP PEEP 6cm VG Rate FiO₂ Oxygen : L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours: on CPAP 6cm. Rains comfortable in prone. Fice line removed. New + wash stopped.

issues of CPAP delivery set 6, delivered 8.

CARDIO VASCULAR SYSTEM

Plan of Care : 20 night

SVE → Magnet changed.

HR - 150/min
RR - 32/min
SpO₂ - 98%
BB2

CNS

Neurological Examination :

Sedation :

Last Neurosonogram : (A) Any Seizures :

CRBS - 92mg/dl

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:
 Input: / (+/-) Output: ml/k/d Urine Output: 2-9 ml/kg/hr Stools: et
 IV Fluids - Type of IVF: @ ml/hr
 Feeding: EBM Formula Donor BM Volume: 22ml Frequency: q2h
 TPN: Yes No - If yes, details: Calories:
 Abdominal Examination: soft, non distended

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :
 Sepsis screen:
 Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	SI.No.	Drugs	Days
		1.		
2.				
3.				

Fortification
 Neb - colistin
 - nucomix
 syp ossopah-D
 my caplets
~~crofer XT~~

Wt P3
Tubing P3
NO DUNE

Plan of Treatment :

- 1) cont CRAP 6cm rams, target SpO_2 90-95.
- 2) TV = 160ml/kg/day → 23ml q2h on feed.
 + 0.5gm fortification 1 1/2 Sachet.
 + 3.7. Nacl 5mg.
- 3) CBA twice weekly.
 RBS OD
- 4) w/e brady - absent
- 5) (K) supplements - crofer, Wt P3

Doctor's Name (Handover given) : Dr. Abimbola
 Signature : [Signature]
 Date & Time : 10/5/26

Doctor's Name (Handover taken) : Popatia
 Signature : [Signature]
 Date & Time : 10/5/26 10am

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
10/5/26 8:20 AM	seen by Dr. Vijayanand	<p>Plan</p> <ol style="list-style-type: none"> 23ml Q2H feed + 1 sachet 0.5gm MMF cont CPAP TEMP Restart arizer vit D <p>Notes Santa 10/5 @ 8:25 AM</p>
10/5/26 6 PM	<p>Afternoon round</p> <p>on CPAP PEEP-6cm</p> <p>No Desat / No Brady</p> <p>No Aspirates</p> <p>SpO2 - 98.1</p> <p>HR - 150/min</p> <p>RR - 49/min</p> <p>Sp. 10/5</p>	<p>Plan</p> <ol style="list-style-type: none"> Continue CPAP PEEP 6 (target SpO2 90-95) ZV - 160ml/kg/day 23ml @ 2H + 1 sachet 0.5gm MMF + 31.ival 5mg Cas - Weekly twice RBSON W/F Brady, Desat <p>Notes Santa 10/5 @ 6 PM</p>

DR. VIJAYANAND JAMALPURI
 Reg. No: 40526

BAH-00650784
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 28 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
10/5/26 9:30pm	<p style="text-align: center;"><u>Night Rounds</u></p> <p>Baby on CPAP PEEP = 6 No tachy, brady Abd → soft, NO distension</p> <p>HR = 158/min RR = 60/min SpO₂ = 98% on CPAP</p>	<p>Seen by Dr. Sareetha sir</p> <p><u>Plan:</u></p> <ul style="list-style-type: none"> • Continue EPAP PEEP = 6 • TV = 160ml/kg/day 23ml/2nd hly + 3% Nacl + 0.5gm MMF 1 sachet • RBS - OD • WIF brady, daret • Shifted to Syp. ceftriaxone • R/V neb mupirocin neb Colistin • NP2 - R/V - 7/AM
		Dr. Sareetha

IP5-00171911
 P SANDHYA RANI
 0 Y 1 M 28 D (M)
 Sr. VIJAYANAND JAMALPURI

12/5/26



ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 60 PMA: 37+4

Term Preterm Gestation : 28+6 Corrected Gestational Age:

OVERVIEW	Problems :	
	S.No.	Current
1.	VP1/VLBW/RD	Hypocolemic
2.	VAP - Klebsiella	Hyperphosphatemic
3.	CLD - Grade -2	Jaundice
4.		
5.		
6.		

Today's Weight : 7.788 Weekly ~~wt gain~~ = (146gms)

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV iNO PPM

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO₂..... Oxygen : L/min

Last CXR : Spo₂.....

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours: on CPAP - FiO₂ = 21% ; PEEP = 6.
Intermittent tachycardia (+) 1

CARDIO-VASCULAR SYSTEM

Plan of Care : HR = 174/min U/O -
 RR = 68/min S/O -
 SpO₂ = 98% on CPAP RBS -
 BP = 56/40 (42)

CNS

Neurological Examination : } CIA fair Sedation NO

Last Neurosonogram : Any Seizures NO

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: ml/kg/hr Stools:

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination: PA: Soft, distended.

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

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Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:


Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION	Antibiotic	SI.No.	Drugs	Days
		1.	Neb Colistin	
2.	N		Vit D3 Ossopan-D	
3.			Orofen XT	
			MME 0.5gm	
			3% Nacl	

Plan of Treatment :


- o Continue CPAP, PEEP - 6
- o Target SpO₂ => 90-96%
- o TV = 16ml/kg/day, 23ml/2nd hery + 3% Nacl + 0.5gm MME 1 each
- o RBS - OD
- o W/P Breach, desat
- o R/V -> Neb Mucormix
Neb Colistin
- o R/V -> NP₂ - T/M
- o Let's Monitor vitals.
- o Hourly.

Doctor's Name (Handover given) : Dr. Remya

Signature : 

Date & Time : 11/5/26, 7am.

Doctor's Name (Handover taken) : Dr. Ashwaga

Signature : 

Date & Time : 11/5/26

EAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 30 D (M)
 Dr. VIJAYANAND JAMALPURI

123



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
11/15/26 11 AM	seen by Dr. Vijayanand Ran	<ol style="list-style-type: none"> ① HFNC trial ② weekly review. ③ weekly once gas.
	Dr. Vijayanand	Dr. Vijayanand
11/15/26	seen by Dr. Vijayanand Ran	<ol style="list-style-type: none"> ① HFNC trial today ② weekly review ③ weekly once gas ④ Ran NP₂ this week wed / Thursday ⑤ stop colistin & mucomix use
	Dr. Vijayanand	Dr. Vijayanand

Dr. VIJAYANAND JAMALPURI
 Reg. No. 40526



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
11/5/26 3 PM	Afternoon Round	
	on CPAP 6cm	Plan
	No distress	① wait HFNC trial today
	HR - 154/min	② TV = 160 ml/kg/day
	SpO ₂ - 98%	2Bml gpt
	RR - 34/min	+ 37 Nacl
	tolerating full feeds	+ 0.5gm MMF
	PA soft	③ CRBS OD
	Passed stools.	④ CRBS weekly once
11/5/26	Nutritional assessment	
	TV = 160 ml/kg/day = 286 ml	
	0.5gm sachet / feed = 12 sachet	
	cal	Prot
EBM	191.6	3.14
	Ca ²⁺	PO ₄
	100	42.9
	Fe	Vit D
	0.57	-
MMF	465	3.24
	71.7	16.32
	0.96	-
OSSEPHD	-	-
	300	132
	-	-
Vit D ₃	-	-
	-	-
	-	-
	-	5
TOTAL	638	6.3
	471.8	191.2
	6.5	880
g/kg	133	3.53
	263	106.9
	3.65	492

36.1

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
11/5/26	weekly Review	
①	last ROP - 30/4/26. zone 3 avascular retina no plus	sw after 3 weeks 21/5/26.
②	last NP 8/5-Hb-12.2 3/5-Ca-8.4 PO ₄ -4.8	on onofex KT 3mg/kg/day oscopan D @ 180mg/kg/day Vit D ₃ 400 IU/day
	28/4 ALP - 690 (at time of screening) 27/4 ALP - 829.	Endo sw → to rpt Ca & PO ₄ after 10 days
③	last NG - 29/4 - DOZ 48 Ⓜ	
④	last 2D Echo (screening) 29/4 - DOZ 48 - Ⓜ	
⑤	last TFT - 6/4 DOZ 5 T ₄ - 1.64 TSH - 11.63	

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
11/05/26	Seen by resident	Adv
7:00 pm	Baby's respiratory support changed from CPAP to HFNC	Continue HFNC
	6L/min FiO2 = 21 %	@ 6L/min Target SpO2 90-95%, if +
	Baby maintaining on HFNC.	- W/F ↑ in RD,
	• HR ⇒ 155/min • RR ⇒ 50/min • SpO2 ⇒ 96% • BP = 65/25 (39)	- IV - 160 cc/kg/day 23ml + 3% a/c + 0.5 (g) m. fortification
	⇒ SER ++	- GRBS - OD - GAS - weekly once
	- tolerating full feeds	noted by Rupanjali a/c

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI (M)
 11-03-2026 0 Y 1 M 30 D
 Dr. VIJAYANAND JAMALPURI



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
11/2/26 9:53 PM		Seen by dr Nilesh
		- continue HFNC
		- wean by 1L if
		no RD, Fio ₂ < 25%
		every 24 hours
		- continue feeds.
		Ruscii
		noted by
		Aswanto
		11/2/26

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 30 D (M)
 Dr. VIJAYANAND JAMALPURI

12/5/26



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 61 PMA: 37+5

Term Preterm Gestation : 28+6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	VPT/ULBW/RA	Chyocalaemia
2.	VAP - klebsilla	hypophosphataemia
3.	CLD - grade - II	Tetany
4.		
5.		
6.		

Today's Weight : 1.810 (↑ 22g)

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV INO PPM

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....FiO₂.....Oxygen :L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours.....

on HFNC - 6L/min
no desat, No desat.
potentially well

Plan of Care :

MR = 166 / ml
PR = 65 / ml
SPO₂ = 100%

Neurological Examination : all limbs moving

ETP - good Sedation.....

Last Neurosonogram : Any Seizures NO

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: $206/2/4$ ml/kg/hr Stools:

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination: *abs - soft*

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

..... *P/A = soft, saturating feeds*

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION

Antibiotic	Sl.No.	Drugs	Days
	1.		
	2.		
	3.		

*Caffeine 3.1. nail Oral supplements
Vit-D3 Neb Mucosol
oraprotin
fartification. Oscopan-A.
~~MHC 0.5g~~ [3.1. Nail
Fartification NEB*

Plan of Treatment :

- Continue HFNC - 6L/min - R/U to ↓ *Apnea*
1 lit/min - in vo minimal RD & FiO₂ 21%.
- TV - 160cc / k / day - 23ml + 3.1. nail + 0.5g fartification *Shant*
full OR.
- *Grabs - OP*
- *Grabs weekly care.*
- *MF apnea, brady, desat, ↑ 12 RD*

Doctor's Name (Handover given) : *R*

Signature : *Ruprajale*

Date & Time: *12/1/20*

Doctor's Name (Handover taken) : *Dr. Arun*


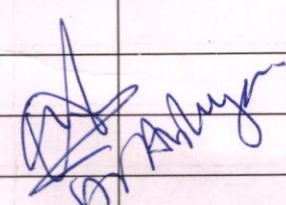
Signature : *[Signature]*

Date & Time: *12/1/20*

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 30 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
12/5/20 10:52M	Seen by <u>Dr. Vijayanand</u> Plan	① cont HFNC sl
	P24 tubings NO IV line	② S/E Ca PO ₄ AZP e gas Friday 15/5
		 Dr. VIJAYANAND JAMALPURI Reg. No: 40526
12/5/20 4PM	Seen by <u>Dr. Vijayanand</u> Plan	① cont HFNC sl/mix
	on HFNC - 5lit No brady / desat	② labs as planned
	Vitals, HR - 150/min RR - 42/min SpO ₂ - 96%	
	P/A - soft	Handover Given by - Dr. Aishwarya Taken by - Dr. Poojitha



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
12/5/26 9pm	Night Round	
	on HFNC - 5ut No bradyl desat, intermittent tachypnea	
	vitals	
	HR - 147/min	Plan
	RR - 58/min	
	SpO ₂ - 97%	→ Continue HFNC 5ut
	BP - 80/42 (55)	Target SpO ₂ 90-95%
	P/A - soft	→ TV - 160cc/kg/day
		23ml + 3% NaCl +
		0.5g mmf - 1 P o sachet
		→ CRBS - OD
		Gas - once weekly
		→ send S/E
		Ca ²⁺ , PO ₄
		ALP } Friday
		Gas } 15/5
		→ w/f bradyl desat
		tachypnea
		Prophylaxis

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 2 M 1 D (M)
 Dr. VIJAYANAND JAMALPURI

13/5/26



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : Day of Life : 62 PMA: 37+6

Term Preterm Gestation : 28+6 Corrected Gestational Age:

Problems :		
S.No.	Current	Past Problems
1.	UPT/VIBW/KD	Hypocalcemia
2.	VAP - Klebsiella	Hypophosphatemia
3.	CD - grade II	Tetany
4.	Hypospadias	
5.		
6.		

Today's Weight : 1827g (↑17g)

RESPIRATORY SYSTEM

Ventilatory Support : Yes No - Day # of Vent :

Mode of Ventilation : HFNC CPAP Conventional Ventilation : SIMV A/C VG HFOV INO PPM

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....FiO₂.....Oxygen :L/min

Last CXR : Spo₂ :

ET Secretions : Clear Thick Yellow Last ABG:

Change over the Last 24 Hours: on HFNC - 6lit/min
No brady/desat
Intermittent tachypnea

CARDIO VASCULAR SYSTEM

Plan of Care : HR - 154/min
RR - 61/min
SpO₂ - 99%
BP - 86/47 (61)

CNS

Neurological Examination :

Sedation :

Last Neurosonogram : (2) Any Seizures :

FLUIDS STATUS NUTRITION

NPO NG Feeds Wt. Gain: Head Circumference:

Input: / (+/-) Output: ml/k/d Urine Output: ml/kg/hr Stools:

IV Fluids - Type of IVF: @ ml/hr

Feeding: EBM Formula Donor BM Volume: Frequency:

TPN: Yes No - If yes, details: Calories:

Abdominal Examination: *P/A - soft*

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture Urine culture ET culture Fungal Culture LP CSF :

INFECTION

Antibiotic	Sl.No.	Drugs	Days
	1.		
	2.		
	3.		

*Caffeine - Drop an - D
 wit D3. 3-1-NaCl Neb
 olojast
 fatidication. Tubings, D1
 3-1-NaCl. ~~Incubator Dry~~
 warmer.*

Plan of Treatment :

- Continue HFNC - 5lit
 Target SpO₂ 90-95%
- TV - 160cc/kg/day => 23ml + 0.3 mg mmf + 3-1-NaCl
- Gas - once weekly.
 RBS - OD
- Send: S/E, Ca²⁺, POU } Friday
 ACP, gas
- Do charting 6 hourly
- Monitor vitals

Doctor's Name (Handover given) : *Prospitia*

Signature : *[Signature]*

Date & Time: *13/5/26 Jan*

Doctor's Name (Handover taken) : *[Signature]*

Signature : *[Signature]*

Date & Time: *13/5/26*

BAH-00650784
 Baby C/P SANDHYA RANI
 11-03-2026 0 Y 1 M 30 D
 Dr. VIJAYANAND JAMALPURI (M)

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
13/5/26 10:03 am.		Seen b → Continue HFNC - sub
		→ Continue kmc NRS Oms
		→ Blood gas - once weekly
		→ No IV line. No pricks
		→ send S/B, Ca ²⁺ ? PO ₂ , ACP gas
	poosithe.	
		Dr. VIJAYANAND JAMALPUR Reg. No: 40526
13/5/26	Afternoon rounds	
10:00 pm	- on HFNC - slot her	Plan:
	- NO Bradycardia	- continue HFNC - slot her
	- NO Desaturation	- TV - 160 ml/kg/day ↓
	SpO ₂ - 96% PR - 160/min RR - 60/min	24 ml 2nd hly full OG feeds + 0.5g mmf + 3% Nacl in each feed



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		<ul style="list-style-type: none"> - Review about - Blood gas once weekly - RBS op - serum electrolytes ca, po4 Alp Blood gas
		<p>Am money.</p>
		<ul style="list-style-type: none"> - continue kmc - next rop on 21/5/26.
		<p><u>Aradh</u></p>
13/5/26		<p>Seen by Dr. Vijayanand</p>
4:15 PM		<p>Place continue</p>
	- stable on HFNC - 5 l/min	- stable on HFNC - 5 l/min.
	- kmc given.	
		<p><u>Aradh</u></p>

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 Y 2 M 1 D (M)
 Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
13/5/20 11PM	<u>Night Round</u>	
	on HFNC 5l/min	Plan
	tolerating well	① cont HFNC 5l/min
	HR-154/min	② TV= 160ml/kg/day
	SpO ₂ -96%	24ml & 24t full on
	RR-65/min	feeds + 0.5gm
	No rales	fortification
	Intermittent tachypnea	+ 3% Nacl.
	comfortable in prone	③ RBS DD
	PA-soft	④ bras on a weekly
	passed stools	⑤ S/E } x/m
	tolerating O ₂ .	ca } on Monday
		PO ₄ } 2 gas.
		ALP }
		⑥ next ROP on 21/5/20.

[Signature]
 Dr. Ananya

(B)



ACTIVITY RECORD FOR BILLING

Name : _____

BAH-00650784 IP5-00171911

UHID No. : _____ Consultant: _____ Dept : _____

Baby Of P SANDHYA RANI
11-03-2026 0 Y 1 M 19 D (M)
Dr. VIJAYANAND JAMALPURI

Date of Admission: _____ Date of Discharge : _____ Time: _____



Room / Bed No : _____ Ward : _____ Suggested Billable bed type : _____

WARD TRANSFERS

Date	Time	From	To	Signature of Nurse

Cross Consultation Visit

	Doctors Name	Date	Order No.	Signature
1	kv prasad	30/4/2026	9585408	POOJA. K
2				
3				
4				
5				
6				
7				
8				
9				
10				

INVESTIGATIONS

Date	Investigations	Order No.	Signature
29/4	CRP, CRP, Cat, P ₀₄	26043689	Karioj
	VBG, RRS	26043688	
	Blood culture	26043700	
30/4	Cat, SFE, P ₀₄	26043773	Karioj
	VBG, RRS	26043772	
30/4	VBG, RRS		Karioj
1/5	CRP, CRP, P ₀₄ , SFE, Cat	26044142	
	VBG, RRS	26044141	
	CRP	265022048	Karioj
2/5	VBG, RRS	26044504	Karioj
2/5	CRP	26044404	
2/5	VBG, RRS	26044476	
2/5	VBG, RRS	26044741	Karioj
2/5	CRP, CRP, SFE, P ₀₄ , Cat	26044855	
	VBG, RRS	26044854	
2/5	CRP	265022423	Karioj
4/5/26	VBG, RRS	26045089	Karioj
4/5/26	Chest x ray	8650022527	Agnes
6/5	VBG RRS	26045528	Karioj
	VBG, RRS	26045528	
5/5	CRP, CRP	26045529	Agnes
6/5	VBG, RRS	26045912	Karioj
6/5	A-rx	22874	Karioj

MEDICAL EQUIPMENT (WARD & ICU)

Date	Name of Equipment	Connecting Time	Disconnecting Time	Order No.	Signature
02/05/26	Inv. Monitor	28/03/26		9536003	Kartik
	Ventilator	28/4/26		9582769	
	Syringe Pump (2)	28/4		9582779	
	Syringe Pump	28/4		9582769	
02/05	Inv. Monitor	31/3/26		9536002	Kartik
	Ventilator	28/4/26		9582769	
	Syringe Pump (2)	28/4/26	01/5	9582779	
	Syringe Pump (1)	28/4		9582769	
3/5	Inv. Monitor	31/3/26		9536003	Kartik
	Ventilator	28/4/26		9582769	
	Syringe Pump (1)	28/4		9582779	
4/5	Inv. Monitor	31/3/26		9536003	Kartik
	Ventilator	28/4		9582769	
	Syringe Pump (1)	28/4		9582779	
5/5/26	Inv. Monitor	31/3/26		9536003	Kartik
	Ventilator	28/4/26		9582769	
	Syringe Pump (1)	28/4/26		9582779	
6/5	Inv. Monitor	31/3/26		9536003	Kartik
	Ventilator	28/4/26		9582769	
	Syringe Pump (1)	28/4/26		9582779	

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
30/4/20	ROP - screening	①	9585407	poopa. Q
2/5	neb	②	9589064	AA
3/5	neb	④	9589595	Karaj
8/5	neb	②	9590264	Arum
3/5	LRRE Transfusion	①	9590478	Karaj
5/5/26	neb	②	9590878	Karaj
4/5	neb	②	9592301	Karaj
6/5	neb	④	9593499	Karaj
5/5	neb	②	9593913	Karaj
6/5	neb	②		

ANY OTHER INFORMATION

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Date : _____ Time : _____ Prepared By : _____

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor

BAH-00650784 IP5-00171911
Baby Of P SANDHYA RANI
11-03-2026 0 Y 1 M 18 D (M)
Dr. VIJAYANAND JAMALPURI



2



ACTIVITY RECORD FOR BILLING

Name : _____

UHID No. : _____ IP No : _____ Consultant: _____ Dept : _____

Date of Admission: _____ Time : _____ Date of Discharge : _____ Time: _____

Room / Bed No : _____ Ward : _____ Suggested Billable bed type : _____

WARD TRANSFERS

Date	Time	From	To	Signature of Nurse

Cross Consultation Visit

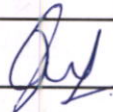
	Doctors Name	Date	Order No.	Signature
1	Dr. Leena Man	29/4/26		
2				
3				
4				
5				
6				
7				
8				
9				
10				

INVESTIGATIONS			
Date	Investigations	Order No.	Signature
21/4/26	AVBG	26040333	[Signature]
22/4/26	RBS	26040710	[Signature]
24/4/26	RBS	26041625	[Signature]
26/4/26	RBS	26042417	[Signature]
27/4/26	RBS	26042643	} [Signature]
27/4/26	NP2	26042660	
27/4/26	VBG	26042651	
28/4/26	RBS	26043046	} [Signature]
28/4/26	SE mg ⁺ calcium	26043148	
28/4/26	CBP CRP Albumin	26043179	} [Signature]
28/4/26	Alp phosphorus	26043207	
28/4/26	vitamin D ₃ PTH	26043207	} [Signature]
28/4/26	calcium	26043238	
28/04/26	X-ray	21700	[Signature]
29/4	Cat, P04	26043351	[Signature]
	RBS (2)	26043350	[Signature]
	RBS (2)	26043355	[Signature]
28/4/26	CBP, CRP, calcium, phosphorus	26043689	} [Signature]
	VBG, RBS	26043688	
	CT calcaneus & sensitivity	26043677	
	X ray	21756	
	NSG	21808	
	USG	21808	
	ECG	285621889	

MEDICAL EQUIPMENT (WARD & ICU)

Date	Name of Equipment	Connecting Time	Disconnecting Time	Order No.	Signature
24/4/26	inv monitor	6/31/4/26		96036003	B
24/4/26	oxygen	3/18/26		96036003	B
	HANC	6/4/26		9545646	B
26/4	inv Monitor	31/4/26		96036003	K
	Oxygen	31/8/26		96036003	
	HANC	6/4/26		9545646	
28/4	ventilator	28/10/26 12-0 PM		9582769 9582779	K
28/4	Sy pump	11		11	
28/4	Sy pump	11		9582769	K
28/4	Sy pump	28/04/26 7-0 PM		9582779	
28/4	Ventilator				K
29/4	inv monitor	31/3/26		9536003	
	Ventilator	28/4/26		9582769	
	Syring pump (2)	28/4/26		9582779	K
	Syring pump (1)	28/4/26		9582769	
28/4	ventilator	28/3/26		9536003	K
	ventilator	28/4/26		9582769	
	Syring pump (2)	28/4		9582779	
	Syring pump (1)	28/4		9582769	

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
28/04/26	Blood specimens	1	9582794	
11	conscious sedation	1	11	} 
11	ET intubation	1	9582794	
28/4	PICC line	①	9583252	

ANY OTHER INFORMATION

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.....

Date : _____ Time : _____ Prepared By : _____

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor
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ACTIVITY RECORD FOR BILLING

Name : _____

UHD No. : _____

Date of Admission : _____ Date of Discharge : _____ Time : _____

Room / Bed No : _____ Ward : _____ Suggested Billable bed type : _____

BAH-00650784 IP5-00171911
Baby Of P SANDHYA RANI
11-03-2026 0 Y 0 M 21 D (M)
Dr. VIJAYANAND JAMALPURI

Consultant: _____ Dept : _____

WARD TRANSFERS

Date	Time	From	To	Signature of Nurse

Cross Consultation Visit

	Doctors Name	Date	Order No.	Signature
1	Dr. hvprasad	02/4/2026	9538800	POOJA K.
2	Dr. hvprasad	16/4/2026	9562173	POOJA K.
3				
4				
5				
6				
7				
8				
9				
10				

INVESTIGATIONS

Date	Investigations	Order No.	Signature
3/14/26	Tax Member	9536003	
2/4/26	RBS	26023013	RDR
3/11/26	RBS	}	
4/4/26	RBS	2602310	sk
5/4/26	RBS	26034281	ke
6/4/26	NP2	26034494	S
6/4/26	GRBS-	26034493	S
6/4/26	VBG	26034493	L
6/4/26	Free Ty	26034799	Rd
9/4/26	RBS		R
10/11/26	RBS	26036039	R
11/4/26	RBS		
12/4/26	RBS	26036780	W
14/4/26	RBS	2603735	Ry
14/4/26	VBG		
11/11/26	X-ray	265-018996	R
15/4/26	RBS	26037828	Ry
16/4/26	GRBS	260384254	Ry
16/4/26	ROP		M
17/4/26	RBS		Ry
18/4/26	RBS		Ry
19/4/26	RBS	26039833	V
20/4/26	NP2	26039834	W

MEDICAL EQUIPMENT (WARD & ICU)

Date	Name of Equipment	Connecting Time	Disconnecting Time	Order No.	Signature
31/3	Inv. Monitor	31/3/26		9536003	SR
	CPAP	31/3/26		9536003	SR
	Oxygen	31/3/26		9536003	SR
1/4	Inv. Monitor	31/3/26		9536003	} DR
	CPAP	31/3/26		9536003	
	Oxygen	31/3/26		9536003	
2/4	Inv. Monitor	31/3/26		9536003	} DR
	CPAP	31/3/26		9536003	
	Oxygen	31/3/26		9536003	
4/4	Inv. monitor	31/3/26		9636003	} DR
	CPAP	31/3/26		9636003	
	Oxygen	31/3/26		9636003	
5/4	Inv. monitor	31/3/26		9636003	} DR
	CPAP	31/3/26		9636003	
	Oxygen	31/3/26		9636003	
6/4	Inv. monitor	31/3/26		9636003	} DR
	CPAP	31/3/26	6/4/26	9636003	
	Oxygen	31/3/26		9636003	
6/4	HFNC	6/4/26		9545646	} DR
	Oxygen	6/4/26		9636003	
14/4					
18/4/26	HFNC				

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
21/4/26	ROP screening	①	2538799	poorja.C.
13/4/26	Blood transfusion	①	9557689	poorja
16/4/26	ROP screening	①	1562712	poorja.C

11/4/26

21/4/26

ANY OTHER INFORMATION

.....

.....

.....

.....

.....

.....

Date :

Time :

Prepared By :

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor

CROSS CONSULTATION FORM

Doctor Name : Date : Time :

Diagnosis :

Hospital :

Type of Referral :

Emergency

Urgent

Non Urgent

Referred for : Opinion Co-Management Transfer of care

Reason for Referral : If for concurrent care specify the particular need, especially in the absence of a second diagnosis:

Signature: _____

Findings and Recommendations :

MBD

Plan Add Adapho to Ossipam D -

Add Phos - + 10 mg/Kg/day \approx 22 mg/day -

1 sachet + 50 ml water = shake well
(50)

↓
1 ml BD.

Get CalP/Mg in 10 days.



Consultant :

Name : Signature : Date & Time :



CROSS-CONSULTATION FORM

Name of Institution:

Name of Consultant:

Name of Consultant (Printed Name):

08/08/2011 - 11

TOTAL PARENTERAL NUTRITION (TPN) CHART

Date : 14/3/26

Patient Name : B/o Sandhya Rani

UHID. NO:

Current (Maximum) Weight : 0.818

Total vol 102

Fluid : 120 ml / kg / day

Feed : 306 42 ml / kg / day

36

Others : 428 ml / kg / day

4.8

TPN Fluid : 10.1

TPN vol 61.2

	Daily Requirement		Amount (ml)	Calories
	Per KG	Total		
Intra Lipid (20%) 1g = 5ml ✓	2 g/kg	1.7g	8.5	17ml
Protein / Aminoveni 10, 1g=10ml ✓	3 g/kg	2.54g	25	50
3% NaCl (1ml = 0.5 mEq) ✓	2 mEq/kg	1.7 mEq	3.4	6.7
KCL ✓	1.5 mEq/kg	1.27 mEq	0.63	1.26
POTPHOS (0.3 ml = 1.2 mEq K)	0.3 ml/kg			
Calcium Gluconate ✓	3 ml/kg	2.54	2.5	5ml
MVI	1 ml/kg		40ml	80ml
CELECEL (Trace Elements)	1 ml/kg			
MgSo4	ml/kg	RV =	21 ml	42ml
Heplock (0.1 ml = 1 unit)	0.5 unit/ml of lipid			
5% Dextrose →			35.85	71.7
25% Dextrose ✓ ←			25ml	50ml
TPN Fluid				
GIR				
NPC / Protein (gm)				

Total Calories: GIR = 5.

Carbohydrates

Proteins

Fats

$$61.2 \times 10 - 5 \times 21$$

20

$$= 25.35 \text{ ml}$$

Name : Ruparaj

Signature : 

Date & Time : 2 14/3/26

TOTAL PARENTERAL NUTRITION (TPN) CHART

Date: 12/3/26

Patient Name: B/o. P. Sandhya rani

UHID. NO: [REDACTED]

Current (Maximum) Weight: 848 gm

10% TPN

Fluid: 80 ml / kg / day

Feed: ml / kg / day → 12ml

Others: ml / kg / day

TPN Fluid: 68ml

RV = 44.6ml

	Daily Requirement		Amount (ml)	Calories
	Per KG	Total		
			24 hrs	48 hrs
Intra Lipid (20%) 1g = 5ml	1 g/kg	0.89g	4ml	8ml
Protein / Aminoveni 10, 1g=10ml	2 g/kg	1.69g	16.9ml	33.8ml
3% NaCl (1ml = 0.5 mEq)	mEq/kg			
KCL	mEq/kg			
POTPHOS (0.3 ml = 1.2 mEq K)	0.3 ml/kg			
Calcium Gluconate	3 ml/kg	2.5ml	2.5ml	5ml
MVI	1 ml/kg		23.4ml	46.8ml
CELECEL (Trace Elements)	1 ml/kg			
MgSo4	ml/kg			
Heplock (0.1 ml = 1 unit)	0.5 unit/ml of lipid			
5% Dextrose	5% D		21.6ml	43.2ml
25% Dextrose	25% D		23ml	46ml
TPN Fluid				
GIR				
NPC / Protein (gm)				

Total Calories:

Carbohydrates
Proteins
Fats

$$\begin{aligned}
 & \Rightarrow 68 \times 10 - 5 \times 44.6 \\
 & \quad \quad \quad \underline{\quad \quad \quad} \\
 & \quad \quad \quad 20 \\
 & \quad \quad \quad = 680 - 223 \\
 & \quad \quad \quad \underline{\quad \quad \quad} \\
 & \quad \quad \quad 20 \\
 & \quad \quad \quad = 457 = 23ml \\
 & \quad \quad \quad \underline{\quad \quad \quad} \\
 & \quad \quad \quad 20
 \end{aligned}$$

Name: Dr. Anu

Signature: Anu

GIR = 5.5 mg/kg

Date & Time: 12/3/26

BAH-00650784 IP5-00171911
Baby Of P SANDHYA RANI
11-03-2026 0 Y 2 M 15 D (M)
Dr. VIJAYANAND JAMALPURI



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
<u>11/3/26</u>	B/o <u>Sandhya Rani</u>	
	Trial of HFNC today. To cent KMC.	
	<u>Ram</u>	

Patient Sticker

M/2

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
12/04/26	B/O Sandhya Rani	
	⊗ Mild intermittent toe jerk for breath.	
	⊗ Continue walk.	
Dunyal		

TOTAL PARENTERAL NUTRITION (TPN) CHART

Date : 16-3-2026

Patient Name : B70 Sandhya Rao UHID. NO. :

Current (Maximum) Weight : 8.8

Fluid : 140 ml / kg / day 119 ml

Feed : 84 ml / kg / day 72 ml

Others : ml / kg / day 47 ml

TPN Fluid :

	Daily Requirement		Amount (ml)	Calories
	Per KG	Total		
Intra Lipid (20%) 1g = 5ml	2.5 g/kg	201	10.5	21 ml
Protein / Aminoveni 10, 1g=10ml	3 g/kg	20	20	40
3% NaCl (1ml = 0.5 mEq)	3 mEq/kg	2.5	5	10 ml
KCL	1.5 mEq/kg	1.27 meq	0.63	1.26
POTPHOS (0.3 ml = 1.2 mEq K)	0.3 ml/kg			
Calcium Gluconate	2 ml/kg	1.6	1.6	3.2 ml
MVI	1 ml/kg		97 ml	
CELECEL (Trace Elements)	1 ml/kg	RV	10 ml	20 ml
MgSo4	ml/kg			
Heplock (0.1 ml = 1 unit)	0.5 unit/ml of lipid			
5% Dextrose				
25% Dextrose	D50%		10 ml	20 ml
TPN Fluid				
GIR				
NPC / Protein (gm)				

Total Calories:

Carbohydrates 10x 47 - 10x 5
 Proteins 45
 Fats 45
 470 - 50 = 9.3 ml
 45

Name : Arunima Aru

Signature :

Date & Time : 16-3-2026

Docu. No. : RCHBH/FRM/CLINICAL / 113 11:30 AM

BAH-00650784 IP5-00171011
Baby Of P SANDHYA RANI
11-03-2026 0 Y 0 M 0 D 19 H (M)
Dr. VIJAYANAND JAMALPURI



CONSENT FOR SPECIAL PROCEDURES

Patient Name : BIO SANDINA RANI Gender: Male Female

UHID No : Department : Date :

I S/D/W/O

Here by give consent for procedure of : LISA

For my patient, Named : BIO SANDHYA RANI

The doctors have clearly explained to me that the procedure has following possible complications:

.....
.....
.....

The doctor have explained to me about the alternatives, risks and benefits for this procedure that :

.....
.....

I have understood the matter mentioned above in language known to me and give consent for the procedure.

Name of the Doctor performing the procedure: Debmalye

Patient Attendant :

Signature : [Signature]

Name :

Relationship with Patient:

Date & Time : 12/3/26 11A

Witness :

Signature : [Signature]

Name : Bhewathi

Date & Time : 12/3/26 11A

Doctor (who is taking the consent) :

Signature : [Signature]

Name : Debmalye

Date & Time : 12/3/26 11A

ప్రత్యేక విధానాలకు సమ్మతి



రోగి పేరు లింగం పురుషుడు స్త్రీ

యు.హెచ్.ఐ.డి విభాగం తేదీ

నేను S/D/W/O

ప్రత్యేక విధానాలకు సమ్మతి ఇవ్వడం ద్వారా

నా రోగికి, పేరు :

ఈ ప్రక్రియ కోసం ప్రత్యామ్నాయాలు, నష్టాలు మరియు ప్రయోజనాలు గురించి డాక్టర్ నాకు తెలిసిన భాషలో వివరించా

.....

.....

.....

నాకు తెలిసిన భాషలో పైన పేర్కొన్న విషయాన్ని నేను అర్థం చేసుకున్నాను మరియు ప్రక్రియకు సమ్మతిని తెలియజేస్తున్నాను.

ప్రక్రియ చేస్తున్న వైద్యుని పేరు :

సహాయకుడు (అటెండెంట్)

సంతకము

పేరు

వైద్యుడు (ఎవరైతే సమ్మతి తీసుకుంటున్నారో)

సంతకము

పేరు

సాక్షి

సంతకము

పేరు

తేదీ మరియు సమయము



CONSENT FOR SPECIAL PROCEDURES

Patient Name : BIO SANDHYA RANI Gender: Male Female

UHID No : 670784 Department : Nicu Date : 12/3/26

I Bhanuchandru S/D/W/O

Here by give consent for procedure of : PERIPHERALLY INSERTED CENTRAL CATHETER

For my patient, Named : BIO SANDHYA RANI

The doctors have clearly explained to me that the procedure has following possible complications:

.....
.....
.....

The doctor have explained to me about the alternatives, risks and benefits for this procedure that :

Bleeding
.....
.....

I have understood the matter mentioned above in language known to me and give consent for the procedure.

Name of the Doctor performing the procedure: Dr Soumya

Patient Attendant :

Signature : Bhanu

Name : Bhanuchandru

Relationship with Patient: father

Date & Time : 12/3/26 1PM

Witness :

Signature : B

Name : Bharathi

Date & Time : 12/3/26 1PM

Doctor (who is taking the consent) :

Signature : Dr Soumya

Name : Dr Soumya

Date & Time : 12/3/26 1PM

ప్రత్యేక విధానాలకు సమ్మతి



రోగి పేరు లింగం పురుషుడు స్త్రీ

యు.హెచ్.ఐ.డి విభాగం తేదీ

నేను S/D/W/O

ప్రత్యేక విధానాలకు సమ్మతి ఇవ్వడం ద్వారా

నా రోగికి, పేరు :

ఈ ప్రక్రియ కోసం ప్రత్యామ్నాయాలు, నష్టాలు మరియు ప్రయోజనాలు గురించి డాక్టర్ నాకు తెలిసిన భాషలో వివరించా

REF 1261.20 2030-12-04 2026-12-04 Insertion Date	VYCON LOT 041225GO	REF 1261.20 2030-12-04 2026-12-04 Insertion Date	VYCON LOT 041225GO
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నాకు తెలిసిన భాషలో



ప్రక్రియకు సమ్మతిని తెలియజేస్తున్నాను.

ప్రక్రియ చేస్తున్న వైద్యుని పేరు :

సహాయకుడు (అటెండెంట్)

సాక్షి

సంతకము

సంతకము

పేరు

పేరు

వైద్యుడు (ఎవరైతే సమ్మతి తీసుకుంటున్నారో)

తేదీ మరియు సమయము

సంతకము

పేరు



CONSENT FOR BLOOD TRANSFUSION

Name: B/o Sandhya Rani Age: 1 Gender: Male Female
UHID.No : 0060784 Date: 12/3/26

- Type of Blood Product:**
- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> Fresh Frozen Plasma | <input type="checkbox"/> Packed Red Blood Cells | <input type="checkbox"/> Random Donor Platelets |
| <input type="checkbox"/> Cryoprecipitate | <input type="checkbox"/> Single Donor Platelet | <input type="checkbox"/> Whole Blood |
| <input type="checkbox"/> Albumin | <input type="checkbox"/> Red Blood Cell | <input type="checkbox"/> Others |

I hereby give my consent for whole blood transfusion or the blood components as part of treatment of myself / my patient while being admitted at Rainbow Hospital. I have been explained all the known risks of transfusion reactions. I have also been explained that the donor blood has been screened for Human Immuno-deficiency Virus antibodies, Hepatitis B surface antigen, Hepatitis C antibodies, Malaria and Syphilis. I have also been explained that transfusion transmitted infections occur even with screened blood, especially if it is in. The "window period" and also due to various other infections which have not been screened for. I also understand that any blood components transfusions carries risk of transfusion associated reactions, fluid overload etc. which are generally rare. The same risks apply for multiple transfusions too.

The doctor have explained to me about the alternative for this procedure that

All the above-mentioned risk, benefits and alternatives have been explained to me by the doctor treating me / my patient in the language that I fully understand and I accept the same and give my consent for all transfusions (the whole blood / or blood components Packed Red Blood Cells, Red Blood Cell, Platelets, Fresh Frozen Plasma, Cryoprecipitate etc.) to me / my Patient during he present hospital stay and treatment.

Patient (Or Patient Relative / Guardian):

Signature: [Signature]
Name:
Date & Time 12/3/26 6 PM

Doctor (Who is talking the consent)

Signature: [Signature]
Name: T. Pavani
Date & Time 12/03/26 6 PM

Witness

Signature: [Signature]
Name: Bharathi
Date & Time 12/3/26 6 PM

రక్త మార్పిడి కొరకు అంగీకార పత్రము

రోగి పేరు: వయస్సు: లింగము పురుషుడు స్త్రీ
UHID సంఖ్య: తేదీ:

- రక్త ఉత్పత్తి రకాలు:**
- తాజా ఘనీభవించిన ప్లాస్మా ప్లాక్ చేయబడిన ఎర్ర రక్త కణాలు Random Donor Platelets
 - క్రయో ప్రెసిపిటేట్ ఒకే ధాత ప్లేటిలెట్స్ Whole Blood
 - మొత్తం రక్తం ఎర్ర రక్త కణం ఇతరులు.....

నేను ఉన్నప్పుడు పూర్తి చికిత్సలో భాగం దాత రక్తాన్ని హెచ్ ఐ వి యాంటీ లక్షణాలు లేవని పరీక్షించి బడిన ఇతర ఇన్ఫెక్షన్ ద్వారా అతి అరుదైన ప్రతిచర్యలు సోకే ప్రమాదం వుండ చేసుకున్నాను.

ఈ ప్రక్రియకు ప్రత్యామ్నాయం గ

పైన పేర్కొన్న అన్ని ప్రమాదాలు, ప్ర వివరించబడ్డాయి. చికిత్స చేస్తున్న ఎర్ర రక్త కణాలు, ఎర్ర రక్త కణాలు, నాకు పూర్తిగా అర్థమగు భాషలో న

సహాయకుడు(అటెండెంట్)

సంతకము

పేరు

తేదీ మరియు సమయము

వైద్యుడు (ఎవరైతే సమ్మతి తీసుకుంటున్నారో)

సంతకము

పేరు

Rainbow Hospital Blood Centre, Rainbow Childrens Hospital
D.No.8-2-120/103/1,2,3,4 & 5, 1st floor, Sy.No.129/11, 403/P, Road No.2, Banjara Hills, Hyderabad, Telangana State
Lic.No. 46/HD/TS/2018/BB/G

FRESH FROZEN PLASMA B.P (I)

Qty. 20

A	HIV I & II/ HBsAG/ HCV - Non reactive VDRL - Non reactive MP - Negative NAT(HIV I & II/ HBsAG/ HCV)- Non reactive
Unit No.: BAH26-00172 Blood Group: A Rh Positive Collection Date: 22/Jan/2026 Expiry Date: 22/Jan/2027	

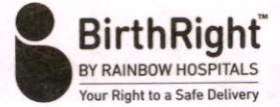
1)administer Without Warming. 2)shake Gently Before Use.3)do Not Add Any Medication. 4)check Blood Group on Label & Recipient's Group and Name Before Administration. 5)use Sterile Transfusion Set With Filter. 6)do Not Dispense Without Prescription. 7)do Not Use if There is Any Visible Evidence. 8)store Between -30° C or Below. 9)resuspend Thawed Precipitate Carefully & Completely Into Residual Plasma. 10)before Use Must Be Thawed With Agitation in a Water Bath

Issue Label / CrossMatching Report	
Patient : B/O. P. SANDHYA RANI	
Patient's Blood Group :A Rh Positive	
Hosp/Dr :Rainbow Childrens Hospital,Dr. VIJAYANAND J	
UHID No.: BAH-00650784 Wd-Bed No.:	
Product : FFP-I	Issue Dt : 12/Mar/2026
Blood Group : A Rh Positive	Colln. Dt :22/Jan/2026
Unit No.:BAH26-00172	Exp. Dt :22/Jan/2027
XMatching Report:ABO Compatible	Issued By : K. Alok
X-matche d by: K. Alok	
Rainbow Hospital Blood Centre, Rainbow Childrens Hospital	
D.No.8-2-120/103/1,2,3,4 & 5, 1st floor, Sy.No.129/11, 403/P, Road No.2, Banjara Hills, Hyderabad, Telangana State Lic.No. 46/HD/TS/2018/BB/G	

పత్రిలో అడ్మిట్ అయి అంగీకారం తెలుపుతున్నాను. శ్రీలయా మరియు సిప్లిన్ పరీక్షలో కనబడని అనేక శ్రుల మార్పిడికి సంబంధించిన తెలెత్తవచ్చు అని నేను అర్థం

డాక్టర్ ద్వారా నాకు ఉత్పత్తులు ప్లాక్ చేయబడిన రక్తము తెలుపుతున్నాను.

AH-00650784 IP5-00171011
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 0 M 0 D 19 H (M)
 Dr. VIJAYANAND JAMALPURI



BLOOD PRODUCTS TRANSFUSION MONITORING FORM

Date: 12/3/26 Time: 6:30 PM

Blood Group of the Patient: A+ve Blood Group on the Blood Bag: A+ve

Blood Bank Issue No: BAH-26-00172 Date of Collection: 22/1/26 Date of Expiry: 22/1/26

Date & Time of Starting Transfusion: 12/3/26 6:30 PM Planned duration of Transfusion: 30 mins

Check for Correct Unit: Correct Patient:

Blood products cross checked by: Nurse 1: Dr. Nilesh sir Nurse 2: sis. Bharathi

Before starting transfusion vitals: Temp: 98.6 F HR: 144 RR: 21 BP: 59/35(93) SpO2: 94%

PLEASE MONITOR THE FOLLOWING:

Date	Time	HR	Temperature	Blood Pressure	SpO ₂	Any Rash	Any Rigors	Any Breathlessness	Any Other Problem
12/3	15 Min	144	98.6 F	59/35(93)	94	NO	-	-	-
3 PM	15 Min	145	98.5 F	55/31(88)	94%	NO	-	-	-
	30 Min								
	30 Min								
	30 Min								
	1 Hr								
	1 Hr								

Comments: During transfusion time no issue

Name of the Incharge-Nurse:

Signature of the Incharge-Nurse:

Date & Time: 12/3/26 6 PM

Name of the Nurse: Bharathi

Signature of the Nurse:

Date & Time: 12/3/26 6 PM

BAH-00650784 IP5-00171011
Baby Of P SANDHYA RANI
11-03-2026 O Y O M O D 19 H (M)
Dr. VIJAYANAND JAMALPURI



Rainbow
Children's
Hospital



CENTRAL LINE INSERTION CARE BUNDLE CHECKLIST

Name: B/o sandhya Rani DOB: 11/3/26 UHID: BAH-00650784 DATE: 12/3/26

Type of Line: PICC Line / UAC / UVC / Other -----

Date of Initial Line Insertion: ----- 12/3/26 -----

One health care professional (nurse) should be watching and supervising the team inserting the central line and alert the team if there is any breach in the following infection control measures.

• Perform hand hygiene before insertion	yes
• Use sterile barrier precautions (i.e., mask, cap, gown, sterile gloves)	yes
• Prepare the insertion site with antiseptic solution as per unit protocol	yes
• Spread the sterile drape without contamination	yes
• Clean the site of selected vein site before cannulating	yes
• Place a sterile, transparent, dressing over the insertion site	yes
• Ensure that no blood at insertion site and in the hub of the cannula	Done



CONSENT FOR BLOOD TRANSFUSION

Name: Blo Sandhya Rani Age: 143 Gender: Male Female
 UHD.No: 676784 Date: 11/3/26

- Type of Blood Product:**
- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> Fresh Frozen Plasma | <input type="checkbox"/> Packed Red Blood Cells | <input type="checkbox"/> Random Donor Platelets |
| <input type="checkbox"/> Cryoprecipitate | <input type="checkbox"/> Single Donor Platelet | <input type="checkbox"/> Whole Blood |
| <input type="checkbox"/> Albumin | <input type="checkbox"/> Red Blood Cell | <input type="checkbox"/> Others |

I, Dhanu C. Mandke hereby give my consent for whole blood transfusion or the blood components as part of treatment of myself / my patient while being admitted at Rainbow Hospital. I have been explained all the known risks of transfusion reactions. I have also been explained that the donor blood has been screened for Human Immuno-deficiency Virus antibodies, Hepatitis B surface antigen, Hepatitis C antibodies, Malaria and Syphilis. I have also been explained that transfusion transmitted infections occur even with screened blood, especially if it is in. The "window period" and also due to various other infections which have not been screened for. I also understand that any blood components transfusions carries risk of transfusion associated reactions, fluid overload etc. which are generally rare. The same risks apply for multiple transfusions too.

The doctor have explained to me about the alternative for this procedure that

All the above-mentioned risk, benefits and alternatives have been explained to me by the doctor treating me / my patient in the language that I fully understand and I accept the same and give my consent for all transfusions (the whole blood / or blood components Packed Red Blood Cells, Red Blood Cell, Platelets, Fresh Frozen Plasma, Cryoprecipitate etc.) to me / my Patient during he present hospital stay and treatment.

Patient (Or Patient Relative / Guardian):
 Signature: [Signature]
 Name: M. Blanu Chander Gowd
 Date & Time: 11/3/26 [Signature]

Doctor (Who is talking the consent)
 Signature: [Signature]
 Name: T. Parvati
 Date & Time: 11/03/26 [Signature]

Witness
 Signature: [Signature]
 Name: Bharathi
 Date & Time: 11/3/26 [Signature]

రక్త మార్పిడి కొరకు అంగీకార పత్రము

రోగి పేరు: వయస్సు: లింగము పురుషుడు స్త్రీ

UHID. సంఖ్య:

రక్త ఉత్పత్తి రకాలు:

Rainbow Hospital Blood Centre, Rainbow Childrens Hospital D.No.8-2-120/103/1,2,3,4 & 5, 1st floor, Sy.No.129/11, 403/P, Road No.2, Banjara Hills, Hyderabad, Telangana State Lic.No. 46/HD/TS/2018/BB/G FRESH FROZEN PLASMA B.P (I)	
Qty. 20	A HIV I & II/ HBsAG/ HCV - Non reactive VDRL - Non reactive MP - Negative NAT(HIV I & II/ HBsAG/ HCV)- Non reactive Unit No.: BAH26-00019 Blood Group: A Rh Positive Collection Date: 03/Jan/2026 Expiry Date: 03/Jan/2027
1)administer Without Warming. 2)shake Gently Before Use.3)do Not Add Any Medication. 4)check Blood Group on Label & Recipient's Group and Name Before Administration. 5)use Sterile Transfusion Set With Filter. 6)do Not Dispense Without Prescription. 7)do Not Use if There is Any Visible Evidence. 8)store Between -30° C or Below. 9)thawed precipitate Carefully & Completely Into Residual Plasma. 10)before Use Must Be Thawed With Agitation in a Water Bath Between 30° C to 37° C.	

- Random Donor Platelets
 Whole Blood
 ఇతరులు.....

నేను ఉన్నప్పుడు పూర్తి చికిత్సలో భాగంగా దాత రక్తాన్ని హెచ్ఐవీ బి యాలక్షణాలు లేవని పరీక్షించి బడలకుండా ఇతర ఇన్ఫెక్షన్ ద్వారా అతి అప్రతిచర్యలు సోకే ప్రమాదం వుండేలా చేసుకున్నాను.

ఈ ప్రక్రియకు ప్రత్యామ్నాయం

ఆసుపత్రిలో అడ్మిట్ అయి డిజిటి అంగీకారం తెలుపుతున్నాను. మలేరియా మరియు సిఫ్లిస్ బీకి పరీక్షలో కనబడని అనేక ఉత్పత్తుల మార్పిడికి సంబంధించిన అంశాలు తెలెత్తవచ్చు అని నేను అర్థం

పైన పేర్కొన్న అన్ని ప్రమాదాలు, వివరించబడ్డాయి. చికిత్స చేస్తున్న ఎర్ర రక్త కణాలు, ఎర్ర రక్త కణాలు, నాకు పూర్తిగా అర్థమగు భాషలో న

Issue Label / CrossMatching Report	
Patient : E/O. P. SANDHYA RANI	UHAN-1
Patient's Blood Group : A Rh Positive	Wd-Bed No.:
Hosp/Dr : Rainbow Childrens Hospital, Dr. VIJAY	
UHID No. : BAH-00650784	
Product : FFP-1	Issue Dt : 11/Mar/2026
Blood Group : A Rh Positive	Colln. Dt : 03/Jan/2026
Unit No.: BAH26-00019	Exp. Dt : 03/Jan/2027
CrossMatching Report: ABO Compatible	Issued By : B. Abhishek
Cross-matched by: B. Abhishek	
Rainbow Hospital Blood Centre, Rainbow Childrens Hospital D.No.8-2-120/103/1,2,3,4 & 5, 1st floor, Sy.No.129/11, 403/P, Road No.2, Banjara Hills, Hyderabad, Telangana State Lic.No. 46/HD/TS/2018/BB/G	

రోగికి చికిత్స చేస్తున్న డాక్టర్ ద్వారా నాకు ఎర్ర రక్తం / లేదా రక్త ఉత్పత్తులు స్యాక్ చేయబడిన (సలైనవి) నా అంగీకారము తెలుపుతున్నాను. సంతకం చేస్తున్నాను

సహాయకుడు(అటెండెంట్)

సాక్షి

సంతకము

సంతకం

పేరు

పేరు

తేదీ మరియు సమయము

తేదీ మరియు సమయము

వైద్యుడు (ఎవరైతే సమ్మతి తీసుకుంటున్నారో)

సంతకము

పేరు

BAH-00650784 IP5-00171011
 Baby Of P SANDHYA RANI
 11-03-2026 OYOMOD5H (M)
 Dr. VIJAYANAND JAMALPURI



BLOOD PRODUCTS TRANSFUSION MONITORING FORM

Date: 11/3/26 Time: 8:30pm

Blood Group of the Patient: A+1/a Blood Group on the Blood Bag: A+1/a

Blood Bank Issue No: BAH 26-00019 Date of Collection: 31/1/26 Date of Expiry: 3/1/27

Date & Time of Starting Transfusion: 11/3/26 Planned duration of Transfusion: 30 mins

Check for Correct Unit: Correct Patient:

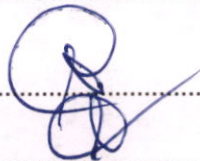
Blood products cross checked by: Nurse 1: for fair Nurse 2: sio Bharsalhi

Before starting transfusion vitals: Temp: 98.6^oF HR 156 RR: 54 BP: 138/85(95) SpO₂ 97%

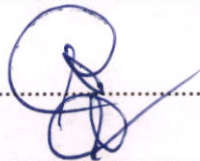
PLEASE MONITOR THE FOLLOWING:


Date	Time	HR	Temperature	Blood Pressure	SpO ₂	Any Rash	Any Rigors	Any Breathlessness	Any Other Problem
<u>6:30pm</u>	<u>15 Min</u>	<u>156</u>	<u>98.6^oF</u>	<u>138/85(95)</u>	<u>97%</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
<u>7pm</u>	<u>15 Min</u>	<u>163</u>	<u>98.3^oF</u>	<u>139/84(98)</u>	<u>96%</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
	<u>30 Min</u>								
	<u>30 Min</u>								
	<u>30 Min</u>								
	<u>1 Hr</u>								
	<u>1 Hr</u>								

Comments: during transfusion time no issue

Name of the Incharge-Nurse: 

Name of the Nurse: Bharsalhi

Signature of the Incharge-Nurse: 

Signature of the Nurse: 

Date & Time:

Date & Time: 11/3/26

H-00650784 IP5-00171911
Baby Of P SANDHYA RANI
11-03-2025 0 Y 1 M 2 D (M)
Dr. VIJAYANAND JAMALPURI



CONSENT FOR BLOOD TRANSFUSION

Name: B/o Vijayanand Jamalpur Age: 33 days Gender: Male Female
UHID.No: BAH-00650787 Date: 13/4/26

- Type of Blood Product:**
- | | | |
|--|--|---|
| <input type="checkbox"/> Fresh Frozen Plasma | <input checked="" type="checkbox"/> Packed Red Blood Cells | <input type="checkbox"/> Random Donor Platelets |
| <input type="checkbox"/> Cryoprecipitate | <input type="checkbox"/> Single Donor Platelet | <input type="checkbox"/> Whole Blood |
| <input type="checkbox"/> Albumin | <input type="checkbox"/> Red Blood Cell | <input type="checkbox"/> Others |

I Bhannu Chander hereby give my consent for whole blood transfusion or the blood components as part of treatment of myself / my patient while being admitted at Rainbow Hospital. I have been explained all the known risks of transfusion reactions. I have also been explained that the donor blood has been screened for Human Immuno-deficiency Virus antibodies, Hepatitis B surface antigen, Hepatitis C antibodies, Malaria and Syphilis. I have also been explained that transfusion transmitted infections occur even with screened blood, especially if it is in. The "window period" and also due to various other infections which have not been screened for. I also understand that any blood components transfusions carries risk of transfusion associated reactions, fluid overload etc. which are generally rare. The same risks apply for multiple transfusions too.

The doctor have explained to me about the alternative for this procedure that DR RC

All the above-mentioned risk, benefits and alternatives have been explained to me by the doctor treating me / my patient in the language that I fully understand and I accept the same and give my consent for all transfusions (the whole blood / or blood components Packed Red Blood Cells, Red Blood Cell, Platelets, Fresh Frozen Plasma, Cryoprecipitate etc.) to me / my Patient during he present hospital stay and treatment.

Patient (Or Patient Relative / Guardian):	Doctor (Who is talking the consent)
Signature: <u>Bhanu</u>	Signature: <u>N Pr...</u>
Name: <u>M. Bhanu Chander Card</u>	Name: <u>N Pr...</u>
Date & Time: <u>13/4/26</u>	Date & Time: <u>13/4/26</u>

Witness

Signature: Poojitha

Name: Poojitha

Date & Time: 13/4/26

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2026 0 Y 1 M 2 D (M)
 Dr. VIJAYANAND JAMALPURI



BLOOD PRODUCTS TRANSFUSION MONITORING FORM

Date: 13/4/26 Time: 1:10

Blood Group of the Patient: Atve Blood Group on the Blood Bag: Atve

Blood Bank Issue No: 00872 Date of Collection: Date of Expiry:

Date & Time of Starting Transfusion: 13/4/26 @ 1:10 Planned duration of Transfusion: 5:10

Check for Correct Unit: Correct Patient:

Blood products cross checked by: Nurse 1: Sr. Vidya Nurse 2: Sr. Jasrui

Before starting transfusion vitals: Temp: 36.6°C HR: 166 RR: 45 BP: 68/44/85 SpO₂: 98%

PLEASE MONITOR THE FOLLOWING:

Date	Time	HR	Temperature	Blood Pressure	SpO ₂	Any Rash	Any Rigors	Any Breathlessness	Any Other Problem
13/4	15 Min	150	36.6	68/44(83)	100	—	—	—	—
13/4	15 Min	157	36.6	78/45(55)	100	—	—	—	—
13/4	30 Min	166	36.6	73/36(60)	98	—	—	—	—
13/4	30 Min	152	36.6	79/56(65)	38	—	—	—	—
13/4	30 Min	175	36.2	67/37(49)	62	—	—	—	—
13/4/26	1 Hr	146	36.6	69/61(64)	71	—	—	—	—
13/4/26	1 Hr	—	—	—	—	—	—	—	—
—	—	—	—	—	—	—	—	—	—
—	—	—	—	—	—	—	—	—	—

Comments: No issue during transfusion

Name of the Incharge-Nurse: Shivalika

Name of the Nurse: Poojitha

Signature of the Incharge-Nurse: (Signature)

Signature of the Nurse: (Signature)

Date & Time: 13/4/26 5:10 PM

Date & Time: 13/4/26 5:10 PM

CONSENT FOR BLOOD TRANSFUSION

BAH-00650784 IP5-00171911
Baby Of P SANDHYA RANI
11-03-2026 0 Y 1 M 17 D (M)
Dr. VIJAYANAND JAMALPURI



Name: Dr. P. Sandhya Rani Age: 0-18 Gender: Male Female
UHID.No: BAH-650784 Date: 28/4/26

- Type of Blood Product:
- | | | |
|--|---|---|
| <input type="checkbox"/> Fresh Frozen Plasma | <input type="checkbox"/> Packed Red Blood Cells | <input type="checkbox"/> Random Donor Platelets |
| <input type="checkbox"/> Cryoprecipitate | <input type="checkbox"/> Single Donor Platelet | <input type="checkbox"/> Whole Blood |
| <input type="checkbox"/> Albumin | <input type="checkbox"/> Red Blood Cell | <input type="checkbox"/> Others <u>LRBE</u> |

I Bhavan Chandera hereby give my consent for whole blood transfusion or the blood components as part of treatment of myself / my patient while being admitted at Rainbow Hospital. I have been explained all the known risks of transfusion reactions. I have also been explained that the donor blood has been screened for Human Immuno-deficiency Virus antibodies, Hepatitis B surface antigen, Hepatitis C antibodies, Malaria and Syphilis. I have also been explained that transfusion transmitted infections occur even with screened blood, especially if it is in. The "window period" and also due to various other infections which have not been screened for. I also understand that any blood components transfusions carries risk of transfusion associated reactions, fluid overload etc. which are generally rare. The same risks apply for multiple transfusions too.

The doctor have explained to me about the alternative for this procedure that with

All the above-mentioned risk, benefits and alternatives have been explained to me by the doctor treating me / my patient in the language that I fully understand and I accept the same and give my consent for all transfusions (the whole blood / or blood components Packed Red Blood Cells, Red Blood Cell, Platelets, Fresh Frozen Plasma, Cryoprecipitate etc.) to me / my Patient during he present hospital stay and treatment.

Patient (Or Patient Relative / Guardian):
Signature: [Signature]
Name: Bhavan Chandera
Date & Time: 28/4/26 @ 6 am

Doctor (Who is talking the consent)
Signature: [Signature]
Name: N. PRATHI BHA
Date & Time: 28/04/26. 6 am.

Witness
Signature: [Signature]
Name: [Signature]
Date & Time: 28/4/26 @ 6 am

[Handwritten mark]

రక్త మార్పిడి కొరకు అంగీకార పత్రము

రోగి పేరు: వయస్సు: లింగము పురుషుడు స్త్రీ
UHID సంఖ్య: తేదీ:

- రక్త ఉత్పత్తి రకాలు:**
- తాజా ఘనీభవించిన ప్లాస్మా
 - ప్లాక్ చేయబడిన ఎర్ర రక్త కణాలు
 - Random Donor Platelets
 - క్రయో ప్రెసిపిటేట్
 - ఒకే ధాత ప్లేటిలెట్స్
 - Whole Blood
 - మొత్తం రక్తం
 - ఎర్ర రక్త కణం
 - ఇతరులు.....

నేను ఇందు మూలముగా యిన్ఫో ఆసుపత్రిలో అడ్మిట్ అయి ఉన్నప్పుడు పూర్తి చికిత్సలో భాగంగా నాకు డిడికి అంగీకారం తెలుపుతున్నాను. దాత రక్తాన్ని హెచ్ ఐ వి య లక్షణాలు లేవని పరీక్షించి బడ మలియు సిస్టిన్ ఇతర ఇన్ఫెక్షన్ ద్వారా అతి అరు సో కనబడని అనేక ప్రతిచర్యలు సోకే ప్రమాదం వు డిడి సంబంధించిన ప్పు అని నేను అర్థం చేసుకున్నాను.

Rainbow Hospital Blood Centre, Rainbow Childrens Hospital
D.No.8-2-120/103/1,2,3,4 & 5, 1st floor, Sy.No.129/11, 403/P, Road No.2, Banjara Hills, Hyderabad, Telangana State
Lic.No. 46/HD/TS/2018/BB/G

LR-LEUCO REDUCED BLOOD CELLS IP PEDIA-1
Qty. 40 ml. Prepared from Whole human blood collected in 49 ml. of C.P.D. SAGM Solution.

HIV I & II/ HBsAG/ HCV - Non reactive
VDRL - Non reactive
MP - Negative
NAT(HIV I & II/ HBsAG/ HCV)- Non reactive
Unit No.: BAH26-01020
Blood Group: O Rh Positive
Collection Date: 25/Apr/2026
Expiry Date: 06/Jun/2026

Rh Positive

1) Administer Without Warming. 2) Shake Gently Before Use. 3) Do Not Add Any Medication. 4) Check Blood Group on Label & Recipient's Group and Name Before Administration. 5) Use Sterile Transfusion Set With Filter. 6) Do Not Discard.

Issue Label / Cross Matching Report

Patient: B/O. P. SANDHYA RANI
Patient's Blood Group: A Rh Positive
Hosp/Dr.: Rainbow Childrens Hospital, Dr. VIJAYANAND J
UHID No.: BAH-00650784
Product: LR-PRBC Pedia-1
Blood Group: O Rh Positive
Unit No.: BAH26-01020
XMatching Report: Compatible
X-matched by: Premalatha

Rainbow Hospital Blood Centre, Rainbow Childrens Hospital
D.No.8-2-120/103/1,2,3,4 & 5, 1st floor, Sy.No.129/11, 403/P, Road No.2, Banjara Hills, Hyderabad, Telangana State
Lic.No. 46/HD/TS/2018/BB/G

OPERATOR: DATE: **28/4/26**

rad-sure™
Irradiation Indicator
25 Gy INDICATOR
LOT: 038874GX25

2027-12-30

ఈ ప్రక్రియకు ప్రత్యామ్నాయం పైన పేర్కొన్న అన్ని ప్రమాదాలు, వివరించబడ్డాయి. చికిత్స చేస్తున్న ఎర్ర రక్త కణాలు, ఎర్ర రక్త కణాలు నాకు పూర్తిగా అర్థమగు భాషలో న సహాయకుడు(అటెండ్నెంట్) సంతకము పేరు తేదీ మరియు సమయము వైద్యుడు (ఎవరైతే సమ్మతి తీసుకుంటున్నారో) సంతకము పేరు

..... మలియు సిస్టిన్ సో కనబడని అనేక డిడి సంబంధించిన ప్పు అని నేను అర్థం చేసుకున్నాను. డాక్టర్ ద్వారా నాకు ప్లాక్ చేయబడిన అంగీకారము తెలుపుతున్నాను.

BAH-00650784 IP5-00171911
 Baby Of P SANDHYA RANI
 11-03-2023 0 Y 1 M 14 D (M)
 Dr. VIJAYANAND JAMALPURI



BLOOD PRODUCTS TRANSFUSION MONITORING FORM

Date: 28/1/26 Time: @ 3:30pm

Blood Group of the Patient: A+ve Blood Group on the Blood Bag: D+ve

Blood Bank Issue No: BAH 26-0020 Date of Collection: 25/1/26 Date of Expiry: 6/6/26

Date & Time of Starting Transfusion: 28/1 @ 3:30pm Planned duration of Transfusion: 4 hrs

Check for Correct Unit: Correct Patient:

Blood products cross checked by: Nurse 1: BRO. ABIN Nurse 2: Sis. Sindhu

Before starting transfusion vitals: Temp: 98.2°F HR: 148b/m RR: 38b/m BP: 61/45/50 SpO₂: 98%

PLEASE MONITOR THE FOLLOWING:

Date	Time	HR	Temperature	Blood Pressure	SpO ₂	Any Rash	Any Rigors	Any Breathlessness	Any Other Problem
28/1/26	15 Min	150bpm	98.2°F	58/33(48)	99%	NA	NA	NA	NA
28/1/26	15 Min	184bpm	98.4°F	61/45(50)	95%	NA	NA	NA	NA
28/1/26	30 Min	120bpm	98.3°F	80/62(58)	100%	NA	NA	NA	NA
28/1/26	30 Min	152bpm	98.2°F	71/68(65)	98%	NA	NA	NA	NA
28/1/26	30 Min	162bpm	98.4°F	69/54(65)	98%	NA	NA	NA	NA
28/1/26	1 Hr	153bpm	98.2°F	80/62(51)	99%	NA	NA	NA	NA
28/1/26	1 Hr	142bpm	98.2°F	90/70(69)	99%	NA	NA	NA	NA

Comments: No Reactions during Blood transfusion

Name of the Incharge-Nurse: Sindhu Name of the Nurse: BRO. ABIN

Signature of the Incharge-Nurse: [Signature] Signature of the Nurse: [Signature]

Date & Time: 28/01/26 @ 7 pm Date & Time: 28/01/26 @ 7pm

CONSENT FOR SPECIAL PROCEDURES

Patient Name : B/OP. Sandhya Rani Gender: Male Female

UHID No : 650784 Department : NICU Date : 28/4/26

I Bhavana Kunderi S/D/W/O

Here by give consent for procedure of : Endotracheal intubation

For my patient, Named : B/O Sandhya Rani

The doctors have clearly explained to me that the procedure has following possible complications:

Bleeding, Bradycardia

The doctor have explained to me about the alternatives, risks and benefits for this procedure that :

Respiratory failure

I have understood the matter mentioned above in language known to me and give consent for the procedure.

Name of the Doctor performing the procedure: Dr. Rathgush

Patient Attendant :

Signature : Bhavana

Name : Bhavana

Relationship with Patient: Father

Date & Time : 28/4/26 @ 3pm

Witness :

Signature : Abin

Name : Abin

Date & Time : 28/4/26 @ 5pm

Doctor (who is taking the consent) :

Signature : Sneha

Name : Y. Sneha

Date & Time : 28/4/26 @ 5pm

ప్రత్యేక విధానాలకు సమ్మతి



రోగి పేరు లింగం పురుషుడు స్త్రీ

యు.హెచ్.ఐ.డి విభాగం తేదీ

నేను S/D/W/O

ప్రత్యేక విధానాలకు సమ్మతి ఇవ్వడం ద్వారా

నా రోగికి, పేరు :

ఈ ప్రక్రియ కోసం ప్రత్యామ్నాయాలు, నష్టాలు మరియు ప్రయోజనాలు గురించి డాక్టర్ నాకు తెలిసిన భాషలో వివరించా

నాకు తెలిసిన భాషలో పైన పేర్కొన్న విషయాన్ని నేను అర్థం చేసుకున్నాను మరియు ప్రక్రియకు సమ్మతిని తెలియజేస్తున్నాను.

ప్రక్రియ చేస్తున్న వైద్యుని పేరు :

సహాయకుడు (అటెండెంట్)

సంతకము

పేరు

వైద్యుడు (ఎవరైతే సమ్మతి తీసుకుంటున్నారో)

సంతకము

పేరు

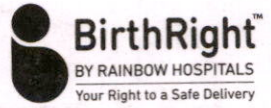
స్వాక్షి

సంతకము

పేరు

తేదీ మరియు సమయము

BAH-00650784 IP5-00171911
Baby Of P SANDHYA RANI
11-03-2026 0 Y 1 M 17 D (M)
Dr. VIJAYANAND JAMALPURI



CONSENT FOR SPECIAL PROCEDURES

Patient Name : BLO SANDHYA RANI Gender: Male Female

UHID No : BAH-00650784 Department : NEW Date : 28/4/26

I Bhanuchandra S/D/W/O

Here by give consent for procedure of : PICC LINE (PERIPHERAL INSERTED CENTRAL CATHETER)

For my patient, Named : BLO- P. Sandhya Rani

The doctors have clearly explained to me that the procedure has following possible complications:

Bleeding, injury, sepsis.

The doctor have explained to me about the alternatives, risks and benefits for this procedure that :

Benfrose and medication administration.

I have understood the matter mentioned above in language known to me and give consent for the procedure.

Name of the Doctor performing the procedure:

Patient Attendant :

Signature : Bhanu

Name : Bhanuchandra

Relationship with Patient: father

Date & Time : 28/4/26 @ 5PM

Witness :

Signature : [Signature]

Name : Ramji

Date & Time : 28/4/26 @ 8PM

Doctor (who is taking the consent) :

Signature : [Signature]

Name : Debonna

Date & Time : 28/4/26 @ 5PM

ప్రత్యేక విధానాలకు సమ్మతి



REF 1261.20
2030-12-04
2025-12-04

VYCON

LOT 041225GO

REF 1261.20
2030-12-04
2025-12-04

VYCON

LOT 041225GO

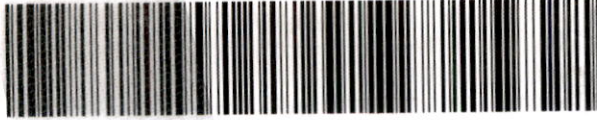
రోగి పేరు
Insertion Date

Insertion Date

యు.హె

నేను

ప్రత్యేక వి



(01)03660812138897(17)301204(30)1(10)041225GO

నా రోగికి, పేరు :

ఈ ప్రక్రియ కోసం ప్రత్యామ్నాయాలు, నష్టాలు మరియు ప్రయోజనాలు గురించి డాక్టర్ నాకు తెలిసిన భాషలో వివరించా

నాకు తెలిసిన భాషలో పైన పేర్కొన్న విషయాన్ని నేను అర్థం చేసుకున్నాను మరియు ప్రక్రియకు సమ్మతిని తెలియజేస్తున్నాను.

ప్రక్రియ చేస్తున్న వైద్యుని పేరు :

సహాయకుడు (అటెండెంట్)

సంతకము

పేరు

వైద్యుడు (ఎవరైతే సమ్మతి తీసుకుంటున్నారో)

సంతకము

పేరు

స్టాఫ్

సంతకము

పేరు

తేదీ మరియు సమయము



BLOOD PRODUCTS TRANSFUSION MONITORING FORM

Date: 3/5/26 Time: 7PM
 Blood Group of the Patient: A+ve Blood Group on the Blood Bag: O+ve
 Blood Bank Issue No: BHA26-01050 Date of Collection: 30/4/26 Date of Expiry: 11/6/26
 Date & Time of Starting Transfusion: 3/5/26 @ 7PM Planned duration of Transfusion: 1 hr
 Check for Correct Unit: Correct Patient:
 Blood products cross checked by: Nurse 1: DR. FAIZ SIR Nurse 2: BRO-ARUN
 Before starting transfusion vitals: Temp: 36.5°C HR: 147 RR: 37 BP: (50) SpO₂: 94%

PLEASE MONITOR THE FOLLOWING:

Date	Time	HR	Temperature	Blood Pressure	SpO ₂	Any Rash	Any Rigors	Any Breathlessness	Any Other Problem
3/5/26	15 Min	155	36.5°C	60/28 (39)	92%	-	-	-	-
3/5/26	15 Min	157	36.5°C	64/27 (40)	91%	-	-	-	-
3/5/26	30 Min	164	36.5°C	70/34 (47)	86%	-	-	-	-
	30 Min	161 bpm	98°F	60/35 (48)	90%	NO	-	-	-
	30 Min	166 bpm	98.2°F	66/38 (49)	95%	NO	NO	NUT	NUT
	1 Hr	165 bpm	97.8°F	69/48 (55)	96%	NO	-	-	-
	1 Hr	149 bpm	98.2°F	66/47 (57)	98%	NO	NUT	NUT	NUT

Comments: NO complications during any after transfusion.

Name of the Incharge-Nurse: S. J. P. G. Name of the Nurse: Karrot
 Signature of the Incharge-Nurse: [Signature] Signature of the Nurse: [Signature]
 Date & Time: 03/05/26 @ 11:30 PM Date & Time: 03/05/26 @ 11:30 PM

BAH-00650784 IP5-00171911
Baby Of P SANDHYA RANI
11-03-2026 0 Y 1 M 22 D (M)
Dr. VIJAYANAND JAMALPURI



CONSENT FOR BLOOD TRANSFUSION

Name: B/o - P. Sandhya Rani Age: 10-57 Gender: Male Female
UHID.No: BAH-00650784 Date: 3/5/26

- Type of Blood Product:**
- Fresh Frozen Plasma
 - Packed Red Blood Cells
 - Random Donor Platelets
 - Cryoprecipitate
 - Single Donor Platelet
 - Whole Blood
 - Albumin
 - Red Blood Cell
 - Others LRRE

Bhanuchandra hereby give my consent for whole blood transfusion or the blood components as part of treatment of myself / my patient while being admitted at Rainbow Hospital. I have been explained all the known risks of transfusion reactions. I have also been explained that the donor blood has been screened for Human Immuno-deficiency Virus antibodies, Hepatitis B surface antigen, Hepatitis C antibodies, Malaria and Syphilis. I have also been explained that transfusion transmitted infections occur even with screened blood, especially if it is in. The "window period" and also due to various other infections which have not been screened for. I also understand that any blood components transfusions carries risk of transfusion associated reactions, fluid overload etc. which are generally rare. The same risks apply for multiple transfusions too.

The doctor have explained to me about the alternative for this procedure that Nil

All the above-mentioned risk, benefits and alternatives have been explained to me by the doctor treating me / my patient in the language that I fully understand and I accept the same and give my consent for all transfusions (the whole blood / or blood components Packed Red Blood Cells, Red Blood Cell, Platelets, Fresh Frozen Plasma, Cryoprecipitate etc.) to me / my Patient during he present hospital stay and treatment.

Patient (Or Patient Relative / Guardian):
Signature: Bhanu
Name: Bhanuchandra
Date & Time: 3/5/26 @ 11 AM

Doctor (Who is talking the consent)
Signature: @
Name: Rupanjali
Date & Time: 3/5/26 @ 11 AM

Witness
Signature: Arun
Name: Arun
Date & Time: 3/5/26 @ 12 AM

రోగి పేరు: వయస్సు: లింగము పురుషుడు స్త్రీ
UHID. సంఖ్య: తేదీ:

- రక్త ఉత్పత్తి రకాలు:**
- తాజా ఘనీభవించిన ప్లాస్మా
 - ప్లాక్ చేయబడిన ఎర్ర రక్త కణాలు
 - Random Donor Platelets
 - క్రయోప్రెసిపిటేట్
 - ఒకే ధాత ప్లేటిలెట్స్
 - Whole Blood
 - మొత్తం రక్తం
 - ఎర్ర రక్త కణం
 - ఇతరులు.....

నేను
ఉన్నప్పుడు పూర్తి చికిత్సలో భాగం
ధాత రక్తాన్ని హెచ్ వి యాం
లక్షణాలు లేవని పరీక్షించి బడి
ఇతర ఇన్ఫెక్షన్ ద్వారా అతి అ
ప్రతిచర్యలు సోకే ప్రమాదం వ
చేసుకున్నాను.
ఈ ప్రక్రియకు ప్రత్యామ్నాయ

పైన పేర్కొన్న అన్ని ప్రమాద
వివరించబడ్డాయి. చికిత్స
ఎర్ర రక్త కణాలు, ఎర్ర రక్త
నాకు పూర్తిగా అర్థమగు భా
సహాయకుడు(అటెండెంట్
సంతకము
పేరు

తేదీ మరియు సమయము
వైద్యుడు (ఎవరైతే సమ్మతి తీసుకుంటున్నారో)
సంతకము
పేరు

Rainbow Hospital Blood Centre, Rainbow Childrens Hospital
D.No.8-2-120/103/1,2,3,4 & 5, 1st floor, Sy.No.129/11, 403/P, Road No.2,
Banjara Hills, Hyderabad, Telangana State
Lic.No. 46/HID/TS/2018/BB/G

LR-LEUCO REDUCED BLOOD CELLS IP PEDIA-1
Qty. 45 ml. Prepared from Whole human blood collected in 63 ml. of C.P.D. / SAGM Solution.

 Rh Positive	HIV I & II/ HBsAG/ HCV - Non reactive VDRL - Non reactive MP - Negative NAT(HIV I & II/ HBsAG/ HCV)- reactive
	Unit No.: BAH26-01050 Blood Group: O Rh Positive Collection Date: 30/Apr/2026 Expiry Date: 11/Jun/2026

1) Administer Without Warming. 2) Shake Gently Before Use. 3) Add Any Medication. 4) Check Blood Group on Label & Recipient Group and Name Before Administration. 5) Use Sterile Transfusion W... Do Not Dispense Without Prescription. 7) Do Not

Issue Label / Cross Matching Report

Patient: B/O. P. SANDHYA RANI	Issue Dt: 03/May/2026
Patient's Blood Group: A Rh Positive	Colln. Dt: 30/Apr/2026
Hosp/Dr: Rainbow Childrens Hospital, Dr. VIJAYANAND J	Exp. Dt: 11/Jun/2026
UHID No.: BAH-00650784	Issued By: R.RAMESH
Product: LR-PRBC Pedia-1	
Wd-Bed No.:	
Blood Group: O Rh Positive	
Unit No.: BAH26-01050	
X Matching Report: Compatible	
X-matched by: PILLEM	

Rainbow Hospital Blood Centre, Rainbow Childrens Hospital
D.No.8-2-120/103/1,2,3,4 & 5, 1st floor, Sy.No.129/11, 403/P, Road
No.2, Banjara Hills, Hyderabad, Telangana State
Lic No. 46/HID/TS/2018/BB/G

బసత్రిలో అడ్మిట్ అయి
అంగీకారం తెలుపుతున్నాను.
సలేలియా మరియు సిఫ్లిన్
సికి పరీక్షలో కనబడని అనేక
మార్పిడికి సంబంధించిన
ప్రవచ్య అని నేను అర్థం
పూ డాక్టర్ ద్వారా నాకు
ఉత్పత్తులు ప్యాక్ చేయబడిన
కొరము తెలుపుతున్నాను.

rad-sure™
radiation indicator
25 Gy INDICATOR
Lot: 038874GX25
OPERATOR:
DATE: 03/5/24
IRRADIATED

సాక్షి
సంతకం
పేరు
తేదీ మరియు సమయము